

COVENANT EYES COLLEGE SCHOLARSHIPS

Scholarship Mission

To promote integrity through scholarship to those who demonstrate integrity in their academic, social and spiritual lives in accordance with the model of making a covenant to set no worthless things before their eyes.

Scholarship Availability

Covenant Eyes has made available each year a budgeted allocation of scholarship funds for the following Scholarship groups with a student enrolling full-time for college classes *and* are current users of Covenant Eyes Software:

Employee

Students living in the household of a Covenant Eyes employee or employee spouse and claimed as a dependent

Members

Students who are also members of Covenant Eyes

Customers

Students attending a school where Covenant Eyes is offered

Community

Students in the Shiawassee County area

The Covenant Eyes Scholarship Committee will accept applications through May 31st of the current year. Each qualifying student is able to receive a non-renewable award once.

Scholarship Eligibility

All applicants must be entering college, with a full-time course schedule, in the fall semester of the year application is submitted. All applicants must be users of the Covenant Eyes Software. Each applicant is eligible to receive the Covenant Eyes Scholarship one time.

In addition, you must be able to answer "yes" to one of the following questions to be eligible to apply for one of the Covenant Eyes Scholarships:

1. Are you a student living in the household of a Covenant Eyes employee or employee spouse and claimed as a dependent on taxes by that employee?
2. Are you a Covenant Eyes member?
3. Are you a student attending one of the following schools? (Christ for the Nations, Mt. St. Mary's Seminary, Southern Baptist Theological Seminary, Grace Baptist College, Toccoa Falls College, Moore Theological College, or Spring Vale Academy Owosso)
4. Are you a student living in Shiawassee County?

Deadline For Applications

Applicant must submit application by May 31st.

Covenant Eyes Scholarship Committee will consider the following:

1. Fully completed application form
2. Submitted written essay written by the student that explains how his/her life is aligned with the above Covenant Eyes Scholarship Mission

NOTE: Covenant Eyes reserves the right to discontinue this scholarship offering at any time and distribute Scholarships as Covenant Eyes shall solely determine. Payment will be made to college of choice on applicant's behalf. Also, recipients who have a change in plans and will not be attending college should return their award to the Covenant Eyes Scholarship Committee. This will allow for redistribution of the money to benefit other students in need. Scholarships will be awarded in the month of August each year.

For additional information concerning the Covenant Eyes Scholarships please contact:

Covenant Eyes Scholarship Committee

P.O. Box 637
Owosso, MI 48867

Or email us at:

employment@covenanteyes.com



Application for Covenant Eyes College Scholarship

1. Are you entering college as a full-time student in the fall of this year? Yes____ No____
2. Do you use Covenant Eyes Software? Yes ____ No ____

Please answer the following eligibility questions:

3. Are you a student living in the household of a Covenant Eyes employee or employee spouse and claimed as a dependent? Yes____ No____
4. Are you a Covenant Eyes member? Yes ____ No ____
5. Are you a student attending a school where Covenant Eyes is offered? Yes ____ No ____
If so please specify school name _____
6. Are you a student living in Shiawassee County? Yes ____ No____

If you answered "yes" to question number 1 & 2 and were able to answer "Yes" at least once to questions 2-6, proceed with this application.

Please print clearly

Today's Date: _____

Name: _____ Date of birth: _____ Age: _____

Current address: _____

City: _____ State: _____ Zip/Postal Code: _____

Phone: _____ Email: _____

Please provide the address to which you would like your award check mailed

Name of school attending: _____

Address of school: _____

City: _____ State: _____ Zip/Postal Code: _____

Student's signature: _____ Date: _____

After completing your application and essay, send to:

Covenant Eyes Scholarship Committee
P.O. Box 637
Owosso, MI 48867

Or email us at:
employment@covenanteyes.com

*Only applications and essays that are complete, legible, and received by **May 31st** will be considered.*

Written Essay: Explain how your life is aligned with the mission of demonstrating integrity in your academic, social, and spiritual life in accordance with the model of making a covenant to set no worthless things before your eyes. (Use extra space if necessary)