
FREDERICKSBURG AREA FELLOWSHIP OF CHRISTIAN ATHLETES

JOHN CLEMENTS MEMORIAL SCHOLARSHIP

SCHOLARSHIP WINNER WILL BE SELECTED BASED ON THE FOLLOWING 10 AREAS:

ACADEMICS (GPA & CLASS RANK)

CHURCH INVOLVEMENT

COMMUNITY INVOLVEMENT

FCA INVOLVEMENT

FCA LEADERSHIP

FAITH WALK

ATHLETIC ACHIEVEMENT

ATHLETIC PARTICIPATION

EXTRA-CURRICULAR ACTIVITIES/SERVICE

REFERENCES (MUST HAVE 2)

ELIGIBLE APPLICANTS:

APPLICANT MUST BE A 2019 HIGH SCHOOL GRADUATING SENIOR FROM FREDERICKSBURG, STAFFORD, SPOTSYLVANIA, KING GEORGE, CAROLINE, ORANGE OR LOUISA AREA.

APPLICANT MUST BE ATTENDING A FULL-TIME ACCREDITED 4-YEAR COLLEGE OR UNIVERSITY IN THE FALL OF 2019.

APPLICANT WINNER SHOULD PLAN TO ATTEND THE BATTLEFIELD AREA FCA VICTORY DINNER 3/30/19

APPLICATION & REFERENCES POSTMARKED BY FEBRUARY 15, 2019

FCA • 10835 TIDEWATER TRAIL • FREDERICKSBURG • VA • 22408

QUESTIONS: LYNN KLINE @ LKLINE@FCA.ORG

2019
Fredericksburg Area
Fellowship of Christian Athletes
John Clements
Memorial Scholarship Application



**FELLOWSHIP OF
CHRISTIAN ATHLETES**

FCA
10835 Tidewater Trail
Fredericksburg, VA 22408
(540) 899-3422
lkline@fca.org

JOHN CLEMENTS MEMORIAL
STUDENT LEADERSHIP SCHOLARSHIP APPLICATION

*Please complete the following form. **Please type or print clearly.** Attach separate sheets, if necessary.*

PERSONAL INFORMATION

Name _____

Address _____

Date of Birth _____ Sex: M F

Phone (____) _____ Email (please print clearly) _____

Parent(s)/Guardian(s) Name _____

SCHOOL

High School _____

Guidance Counselor _____

GPA _____ SAT _____ ACT _____ Class Rank _____ / _____

Choice of College/Univ. (1) _____

(2) _____

CHURCH INVOLVEMENT

Current Church (if any) _____

Address _____

Pastor _____ Phone/email _____

Youth Pastor _____ Phone/email _____

Out of 4 Sunday church services each month, circle the number that you typically attend: 1 2 3 4

Out of 4 church youth services each month, circle the number that you typically attend: 1 2 3 4

Besides attending services, how have you participated in and served at your church?

COMMUNITY INVOLVEMENT

List any other community service in which you have participated or helped organize.

FCA LEADERSHIP

Have you ever attended any FCA summer camps? Yes No

If so, which one(s), where and when?

Have you ever served at any FCA summer camps? Yes No

If so, which one(s), when, in what role did you serve?

List your involvement and leadership in the FCA Huddle at your school (include offices held and special projects coordinated, etc.)

Out of 4 Huddle meetings each month, circle the number that you typically attend: 1 2 3 4

What is the most rewarding aspect of being involved in your school's FCA huddle?

ATHLETIC PARTICIPATION

High School JV/Varsity

Sport	Years	Position	Honors/awards

Club/Community Teams

Sport	Years	Position	Honors/awards

WORK EXPERIENCE

Employer	Dates of Employment	Position	Responsibilities

EXTRA-CURRICULAR ACTIVITIES & CLUBS

List any extra-curricular activities or clubs of which you have been a part (participation, offices held, honors and awards):

Please rate yourself in the following areas:

	Excellent	Above Average	Average	Below Average	Not Applicable
SPIRITUAL MATURITY/LEADERSHIP					
Spiritual role model, reflecting Christ in my daily life					
Respect authority, work well under authority					
Work well w/others of different denominational background & spiritual commitment/maturity (meeting others where they are)					
Applying faith in sports					
LEADERSHIP					
Athletic role model					
Show initiative, insight & a willingness to assume responsibility					
Ability to make decisions within specified guidelines					
Punctual & dependable					
Can initiate/lead a small group discussion					
PEER RELATIONSHIPS					
Show sensitivity/empathy to others					
Demonstrate listening skills					
Enthusiastic, friendly					

COMPLETE THE FOLLOWING: (If you need more space, please continue your answers on a separate page.)

1. Explain when and how your walk with Christ began.

2. How do you live out your faith in Christ daily?

3. What would you say if Christ were to ask you, "Why should I let you into heaven?"

4. How do you respond when faced with:

◆ Use of alcohol/drugs/tobacco

◆ Pre-marital sex

◆ Homosexuality

REFERENCES

Choose **two** of the following to complete the FCA Student Leadership Scholarship recommendation form. Have the person completing the form mail the recommendation directly to the FCA Office. We suggest you include a stamped, addressed envelope and clearly indicate the date by which the recommendation must be received by our Office:

FCA Huddle Coach/Sponsor _____

Phone (_____) _____ Email _____

Athletic Coach _____

Phone (_____) _____ Email _____

Pastor/Youth Pastor _____

Phone (_____) _____ Email _____

Teacher/Administrator _____

Phone (_____) _____ Email _____

Other _____

Relationship to Applicant _____

Phone (_____) _____ Email _____

PLEASE SEND COMPLETED APPLICATION TO:

**FCA
10835 Tidewater Trail
Fredericksburg, VA 22408
PHONE: (540) 899-3422
EMAIL: lkline@fca.org**

POSTMARK BY FEB 1, 2019

REFERENCE FOR
FELLOWSHIP OF CHRISTIAN ATHLETES
JOHN CLEMENTS MEMORIAL
SCHOLARSHIP

The Fellowship of Christian Athletes is honored to present an outstanding FCA senior student leader with a \$1,000 scholarship. You have been requested as a reference for a student who is an applicant for our Student Leadership Scholarship. By completing the following recommendation form, you will help us to assess the applicant's qualifications for this award.

The Student Leadership Scholarship will be awarded based on the applicant's Academics (GPA & Class Rank), Involvement in Church, Community & FCA, FCA Leadership, Faith walk, Athletic Achievement, Athletic participation, Extra-curricular activities/service and References (Must have 2).

Thank you for taking the time to assist us in this application process.



FELLOWSHIP OF
CHRISTIAN ATHLETES

To the best of your knowledge, has the applicant ever been convicted of child abuse, sexual misconduct or abuse?

Yes No

If yes, please explain the circumstances in the comment section below.

REQUIRED: Comment on the applicant in any way that might assist us in evaluating this applicant for leadership. Attach a separate sheet if desired.

Finally, please check below your choice to complete this sentence: I _____ that this applicant be considered as a candidate for the FCA Student Leadership Scholarship.

- Strongly recommend Recommend
 Recommend with reservation Do not recommend this applicant

Name of Reference _____ Title/Position _____

Address _____
Street City ST Zip

Telephone (_____) _____

Signature _____ Date _____

Postmark by FEB 1, 2019
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