

*Eternal Hope of Glory*  
*Proudly Presents the "Nate Ellis Scholarship"*

2. All applicants must be a Senior and reside in Chester Twp., PA
3. Must have a 3.0 GPA or higher attach transcript
4. Must have proof of attending a college or technical school for 2 or 4 years in the fall of 2023
5. Incomplete applications **WILL NOT** be considered
6. Email completed applications to *Trustngod2004@aol.com* or mail to  
***EHOG Scholarship Committee 1801 W. 12th ST Chester Twp., Pa 19013***

Please submit the following documents in a sealed envelope:

- Scholarship application
- Scholarship Essay
- (2) Two letters of recommendation
- Transcripts
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**Entry requirements**

- 500 word Essay
- Essay must be typed doubled space using Time Romans or equivalent 12 point font
- Recommendation letters must be typed

**Essay questions: 1. What do you intend to accomplish with your degree?**  
**2. Why is a college degree important to you?**

Award Component- 1 \$500.00 scholarship will be awarded to the selected student living in Chester Township, PA graduating from a public or charter school in Pennsylvania.

**NATE ELLIS SCHOLARSHIP APPLICATION**  
**2023**

**Please type your answers. Incomplete applications will not be accepted.**

1. Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_
2. Mailing Address:  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
Gender: M \_\_\_\_\_ F \_\_\_\_\_
4. Daytime Telephone Number: (     ) \_\_\_\_\_
5. Current High School: \_\_\_\_\_  
GPA \_\_\_\_\_ ACT or SAT Score \_\_\_\_\_

**Please submit all recent transcripts and score sheet**

6. What college will you be attending in the Fall of 2023:  
\_\_\_\_\_
7. Are you the first person in your family to go to college? YES \_\_\_\_\_ NO \_\_\_\_\_
8. A- List any academic honors, awards and membership activities while in high school  
B - List any activities at school or in your community, a Resume can be attached
9. Name and address of parent(s) or legal guardian  
Name(s) \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_