

SGRADUATE RECOGNITION FORM

Applicant must be a member as of **March 1, 2024**

Date of Right Ha	land of Fellowship:	
Name:		
Address:		_
City:	State: Zip Code:	
Telephone Day ()	Evening ()	
GRADUATION INFORMATION	N (check one):	
Kindergarten 8th Grade	High School	
College Degree earned:		_
		_
	Date:	
	State: Zip	
	:	_
Anticipated Field of Study:		
Applicant's Signature		
Parent's/Legal Guardian'Signature		
(Kindergarten, 8tl	th Grade, High School only)	
	beginning March 15, 2025 at www.covucc.org. *Please vucc.org. If you have questions/concerns, contact the ship@covucc.org.	
Application deadline is June 8, 2025	*	
Please note: Late or incomplete applic	ications will not be processed.	

*Scholarship Sunday is June 22, 2025 during the 11:00 AM Worship Service.