



ECKERD COLLEGE

OFFICE OF ADMISSION

NOMINATION FORM - FOR PRESBYTERIAN CHURCH PASTORS

The Church and Campus Scholarship Program at Eckerd College

Nomination Form is due no later than February 1

Name of Student _____ Female ____ Male ____

Street Address _____

City/State/Zip _____

Home Phone () _____ Parent's Names _____

High School Senior _____ Transfer Student _____ Years as Presbyterian Church Member _____

Church Activities:

Feel free to use the reverse side of this form, or to write a letter if you prefer, regarding:

1. The nominee's moral character, and spiritual formation. _____

2. The nominee's potential for future contributions to the church and community.

3. The nominee's academic potential. _____

Pastor's Name _____ Name of Church _____

Church Address _____ City/State/Zip _____

Pastor's Signature _____

PLEASE RETURN TO: Eckerd College Dean of Admission

THINKOUTSIDE