

# Chautauqua Scholarship 2012 Application

June 23 to July 20

## International Order of The King's Daughters and Sons



**From:** Director, Chautauqua Scholarship Department  
Valerie D. Roberts  
8 Foxboro Drive  
Vienna, West Virginia 26105

Email: [valerie\\_roberts\\_1@hotmail.com](mailto:valerie_roberts_1@hotmail.com)  
Telephone: (304) 210-0071 or (304) 295-8423

- Step 1: Complete all sections of this application before mailing / emailing to your IOKDS contact. Also, send the completed electronic form to me at the above email address.
- Step 2: You must have a copy of the *Information Booklet* to use while completing this application and to keep for the remainder of the application process. This can be accessed at [www.iokds.org/csp.html](http://www.iokds.org/csp.html).
- Step 3: You are advised to make a copy of the completed application for your files. To speed the application process, please email the completed application and follow it by a mailed copy including the letters of recommendation and all signatures.
- Step 4: After the application has been reviewed, the decision will be sent to you by email.

***Please submit your applications as soon as possible or by  
April 1, 2012***

***Thank you for your interest and best regards.***

**Sponsorship Section**

**To be completed by:** Branch President or Chautauqua Branch Director

Deadlines for submission:

**April 1, 2012**

**Check one:**

- Attached please find a check payable to the International Order of The King's Daughters and Sons for \$1,250.00 **(US funds)** from our Branch to sponsor this student.
- Please consider this student for an International Scholarship

Name of Student:

Name of Scholarship to be awarded:

Date completed application received by Branch:

**Branch Checklist:**

- a. I have ensured that the applicant has a copy of the Chautauqua Scholarship booklet.
- b. I have given the applicant my contact information so he/she can contact me at any time.
- c. I have kept a copy of this application for our Branch files.
- d. The letter of recommendation from the Pastor is attached.

Please sign:

\_\_\_\_\_  
 Branch President  
 Phone ( ) \_\_\_\_\_

\_\_\_\_\_  
 Chautauqua Branch Director  
 Phone ( ) \_\_\_\_\_

**Section 1 - Personal Identification Information**

- a. Full Name \_\_\_\_\_
- b. Birth date: \_\_\_\_\_  
(day/month/year)
- c. Home Address
- d.  Male                       Female

**Contact Information**

- a. Preferred first name (that is, the name by which you wish to be called)
- b. Mailing Address:(if it is different from above)
- c. Telephone Numbers (include area code)  
College residence (if applicable):  
Home:  
Cell phone:
- d. E-Mail
- e. Please list the names of those who have shared information about the Chautauqua Institution or the Chautauqua Scholarship Program with you.

### **Education Profile**

- a. Name of the college or university you currently attend:
- b. Address while at college:  same as mailing address
- c. Date you enrolled at this school:
- d. Number of years you will have successfully completed by June 2011:
- e. Field(s) of study:
- f. Date 2011/12 school year ends:
- g. What do you consider to be your greatest achievement while at college?
- h. What has been your most significant contribution to your college community to date?
- i. If you are applying based on years of work experience rather than college education, please give details of your work experience.

### **Church and Faith Profile**

- a. Name and address of your home church:
- b. Name of Pastor/Minister/Priest
- c. Church affiliation:
- d. Are you, or any member of your family, a member of The King's Daughters and Sons?  
 Yes  No  
If yes, please provide their name(s) and the Branch to which they belong:
- e. Describe why you believe that you would benefit from a time of spiritual reflection and renewal.
- f. What do you consider to be your most significant contribution to your church community to date?

- g. How prepared are you to discuss and/or listen to Christian beliefs that are different from yours?
- h. In your own words, please write your statement of faith and describe how your Christian beliefs and your personal relationship with God are demonstrated in your daily life.

## Section 2 - Personal Profile

### A. Skills and Talents

Answer the following questions fully.

1. Describe the extent to which you feel that you meet the following five criteria (you may find the description of these criteria in the *Information Packet* helpful).
- Christian beliefs and practice (your worship activities)
  - An inquiring mind
  - Energy and enthusiasm
  - Appreciation of the arts
  - Respect and responsibility
- a.
2. Read the section **Expectations of Scholarship Students** again. Describe any previous experiences you have had with a program as structured as this one is. What challenges will this style of program present to you?
3. Do you play a musical instrument? If yes, which one(s)?
4. List some of your talents you would be willing to share (for example, if you play a musical instrument, sing, dance, can lead games, story-telling):
5. Are you able to participate fully in the program by reading from the Bible, leading the class in an informal worship service and speaking in front of a group?
- Yes       No
- If no, please explain:
6. Please attach a personal resume which describes your education and work experience (paid and voluntary).

**Your answers to the following questions will help with roommate selection.**

1. In the past, how successful have you been at living in close quarters with others?
2. What is your favorite way to relax?
3. How would your best friend describe your personality?
4. Place yourself on the line below to illustrate your usual standard of housekeeping.

Very messy \_\_\_\_\_ Very neat

5. Underline the phrases that describe you best:

I like to go to bed late;	I like to get up early.
I am a sound sleeper;	I am a light sleeper.
I enjoy loud music all the time;	I like regular quiet times.
I like to be in a roomful of people;	I like a little solitude.
I am an organized person;	I am rarely organized.
I like to get up late;	I like to go to bed early.

**Section 3: Medical/Health Profile and Emergency Contact Information  
To be completed by student and parent.**

Name of student:

Medical Insurance Company Name:

Insured's Name:

Policy #

Medical services are available but limited at the Chautauqua Institution. Therefore, we ask that you not apply if you are currently being treated for any of the following:

Moderate to severe asthma	Bronchitis (chronic)
Cancer	Depression
Diabetes (insulin dependent)	Emphysema
Epilepsy	Heart Disease
Hepatitis	High Blood Pressure
Mental/Emotional Illness	Stomach Ulcer
Stroke	Tuberculosis



#### Section 4: Parent Information

**Applicants who are financially fully independent and able to assume the travel costs if dismissed from the program are not required to obtain parental signature.** All applicants are encouraged to give this letter to a parent/guardian.

Dear Parents,

Your daughter/son is applying for the 2012 Chautauqua Scholarship Program. More than 2100 students have received Order scholarships since 1920. This is a once-in-a-lifetime opportunity to spend four weeks at a religious, cultural, and educational center. As religious faith is at the core of the Chautauqua Institution and the International Order of The King's Daughters and Sons, we want to select students who are practicing Christians. If you have not already done so, I ask that you read the information packet provided to this student. Here are some of the important restrictions at Chautauqua. Alcohol may not be consumed by our students. Smoking inside a Chautauqua building or program facility is not permitted and this includes Order properties. Permission to leave the grounds must be obtained from the Director. Our students are expected to comply with rules of the Institution concerning quiet hours after 11 p.m.

These restrictions may be beyond what your daughter/son has to comply with either at home or at college. That is why I want to make sure you and your son or daughter understand fully the expectations of the program **before** accepting a scholarship.

Violation of the rules of the program will result in dismissal from the program. You will be notified in the event of this occurrence and you will be responsible for any additional charge incurred for changing airline reservations or making other travel arrangements.

Your signature on the application form confirms your understanding of the expectations of our scholarship program. Please initial one copy of this letter at the bottom and return it with the application and keep the other copy for your information.

Sincerely,

Valerie Roberts  
Director, Chautauqua Department

\_\_\_\_\_ Please initial and send with completed application.

Please copy and keep.

## **Section 5: Letters of recommendation.**

**Two letters of recommendation are required. One is to be completed by your Pastor/Minister/Priest** and the other is to be completed by the person nominating you for this scholarship.

Please give this page to the pastor of your church.

### **To the Pastor:**

This student is applying for a four-week scholarship at Chautauqua Institution, Chautauqua, NY, a center for religion, education, culture and recreation. The International Order of The King's Daughters and Sons sponsors this program for Christian young adults from around the world. They participate in worship on a daily basis. A letter of recommendation is required from you as part of the application process.

Please refer to the following questions in your letter of recommendation.

- a. How long have you known the students and his/her family?
- b. What activities has the student participated in at church?
- c. What leadership qualities has the student demonstrated?
- d. Do you think this student has the spiritual maturity to participate in an intensive summer program for Christian young adults with diverse backgrounds?

Your letter may be returned, in a sealed envelope, to the student. It will be forwarded to me with the completed application. Thank you for your help. You may also reply directly to me via email, letting the student know that you have done so.

If you require further information about the program, please speak first to the student and the parents. The student has been given an Information Packet which could be copied for your information.

If you require further details from me, please do not hesitate to reach me at:

Valerie Roberts  
Chautauqua Program Director  
International Order of The King's Daughters and Sons

Email: [valerie\\_roberts\\_1@hotmail.com](mailto:valerie_roberts_1@hotmail.com)  
Telephone: (304) 210-0071 or (304) 295-8423

**Section 6 - Applicant's Pledge:**

If I am granted this Chautauqua Scholarship, I shall cooperate fully with the planned program and abide by the rules and regulations of the Order and the Chautauqua Institution. I shall accept the responsibilities in the household of which I am a guest and will participate in and contribute to all activities planned for scholarship students. I will strive to behave in a Christian manner and uphold the dignity of the Order of The King's Daughters and Sons while I am at Chautauqua. I understand that a breach of this pledge will result in my dismissal from the program and that any additional travel costs incurred as a result will be at my own expense.

Signature of applicant: \_\_\_\_\_ Date:

**Section 7 - to be completed by person who is nominating this student.**

I have interviewed this student and read this completed application carefully. In my opinion, the student meets all the eligibility criteria. I believe that this student is an excellent candidate for a scholarship.

Signed:

Date: