

## APPLY FOR THE 2024

# DANA MICHELLE PETTAWAY SERVANT'S HEART SCHOLARSHIP



***WIN \$2,000 for College Expenses!***

**APPLICATION POSTMARK DEADLINE:  
MARCH 18, 2024**

### **WHAT IS THE DMP SERVANT'S HEART SCHOLARSHIP?**

Dana Michelle Pettaway Ministries, Inc., was established in January 2004, in memory of Dana Michelle Pettaway. Dana was a vibrant, teenage leader who glorified God in every aspect of life. Her passion was to impact others through Christian mentorship, positive role modeling, evangelism and tangible acts of service.

**The Dana Michelle Pettaway Servant's Heart Scholarship** seeks to identify high school seniors who are influential for God through Christian leadership and service, while overcoming their own obstacles. The scholarship will be awarded to 7 winners.

### **WHO QUALIFIES TO APPLY?**

You must meet the following criteria:

- ✓ Be a legal U.S. resident
- ✓ Attend high school in one of the following Texas counties: Ft. Bend, Harris, Waller
- ✓ Be a high school senior who is eligible for graduation in May or June of 2024
- ✓ Plan to enroll as a full-time student in an accredited college, vocational or technical school in the Summer or Fall of 2024
- ✓ Minimum GPA of 2.75
- ✓ Minimum of 30 documented service hours
- ✓ Must satisfy Overcomer Criteria

### **HOW DO I APPLY?**

The 2024 Dana Michelle Pettaway Servant's Heart Scholarship Application is attached hereto, or available for download at [www.dmpministries.org](http://www.dmpministries.org). One application per household. Must mail in.

### **How Are Winners Chosen?**

- 1) The selection criteria are based upon Essays, Letters of Recommendation, and service in EACH of the following 3 areas: Church, School and Community, as well as meeting the Overcomer Criteria (see below). Finalists must attend a mandatory interview via Zoom on **April 27, 2024.**

### **Overcomer Criteria**

- 2) Scholarships will be awarded to Overcomers who meet the above qualifications in the midst of difficult circumstances or obstacles. Overcomers are defined as student leaders who prevail in service, despite adverse challenges. These challenges must be described in Essay #2, with an explanation of how you overcame these obstacles and continued service.

### **POSTMARK DATE AND MAILING INSTRUCTIONS**

Mail **1 ORIGINAL PLUS 5 COPIES** of the Application Form, Essays, Letters of Recommendation, Transcript, and Service Hours Summary, **6 COPIES** of the College Acceptance Letter (you keep original), and one high quality headshot photo. Mail **IN ONE ENVELOPE** to the address below. **MUST BE POSTMARKED NO LATER THAN MARCH 18, 2024.** Do not fold.

Materials postmarked after the deadline, or with missing information, will not be considered - no exceptions. Mail completed application to:

**DMP MINISTRIES, INC.  
14550 Torrey Chase Blvd., Suite 257  
Houston, TX 77014**

## APPLICATION DETAILS

1. **APPLICATION FORM** (original plus 5 copies). Type or print legibly using dark ink.
2. **ESSAY #1** (original plus 5 copies). No longer than TWO 8½ x 11 inch typed sheets, double-spaced, 10 font. Topic: “My Faith and My Service in Church, School, and Community”. Include the following in your essay:
  - ✓ When did you become a Christian, and how did it change you?
  - ✓ How do you serve in your church, school and community, and your reasons for serving.
  - ✓ Describe any projects you initiated or led.
3. **ESSAY #2** (original plus 5 copies). No longer than ONE 8½ x 11 inch typed sheet, double-spaced, 10 font. Topic: “My Testimony of Overcoming Difficult Circumstances”. Include the following in your essay:
  - ✓ Any personal challenges or obstacles you’ve faced over the last 4 years while serving.
  - ✓ Why did you continue in service?
  - ✓ How did your faith help you in those difficult circumstances?
4. **TWO LETTERS OF RECOMMENDATION** (original plus 5 copies). A teacher, mentor, supervisor, pastor/youth pastor, or counselor may write these letters; no family members. Letter must include a brief description of their interaction with you, and their observations of your service. Must have one letter from Church, and one from School OR Community. No longer than 1 page, and **MUST** include signature, title, phone number and email of writer.
5. **HIGH SCHOOL TRANSCRIPT** (original plus 5 copies).
6. **SERVICE HOURS** (original plus 5 copies). Must show a minimum of 30 service hours, but please document **ALL** service hours on Service Hours form (attached). Include hours from Church, School and Community (all three). Supervisor of each assignment must sign. One agency per form.

7. **LETTER OF ACCEPTANCE**. 6 copies (you keep original) of a letter of acceptance from your intended college must be submitted before your interview. We understand this college choice may change.
8. **INTERVIEW**. If selected as a Finalist, your interview with the Selection Committee will be held **Saturday, April 27th, 2024 on Zoom. Interview is mandatory**. You will be notified of the interview time if selected as a Finalist.
9. **PHOTO**. Enclose one recent, high quality (waist up only) photo of yourself. No larger than 5 x 7.

## AWARD RECIPIENTS

**Winners of the Award** will be notified on or before May 1, 2024. If selected as a DMP Servant’s Heart Scholarship Recipient, you will receive:

- ❖ \$1,000 per semester for 2 consecutive semesters. The check will be mailed to your student account at your college. If you do not attend an institution of higher learning in year 2024, award will be revoked.

### *Application Submission Checklist*

*A complete application consists of the following items. Place a check mark in front of each item to make certain your application is complete!*

- Application Form filled out completely, typewritten or printed in dark ink (original plus 5 copies).
- Your typed Essay #1 (original plus 5 copies).
- Your typed Essay #2 (original plus 5 copies).
- 2 typed Letters of Recommendation (original plus 5 copies of each).
- Your High School Transcript. We will accept unofficial transcripts (original plus 5 copies).
- Service Hours Summary documenting a minimum of 30 hours of service. One form for each agency. Record ALL service hours, including church ministry (original plus 5 copies).
- Letter of Acceptance from your intended college (6 copies, you keep original).
- Recent high quality, headshot photo of yourself (no larger than 5 x 7).

# 2024 DANA MICHELLE PETTAWAY SERVANT'S HEART SCHOLARSHIP APPLICATION FORM



**Eligibility:** Applicants must answer the following qualifying questions. Information may be verified.

- Are you a high school senior eligible for graduation in May or June of 2024?  Yes  No
- Are you planning to attend a college, vocational or technical school in the summer or fall of 2024?  Yes  No
- Do you have a GPA of at least 2.75 on a 4.0 scale?  Yes  No
- Did you provide at least 30 hours of service in your school, church and community combined?  Yes  No
- Are you a Legal U.S. Resident attending a High School in Fort Bend, Harris or Waller County?  Yes  No

## Personal Information

First and Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Intended College, Technical or Vocational School: \_\_\_\_\_

How did you learn of the DMP Servant's Heart Scholarship? \_\_\_\_\_

## Parent/Guardian Information

Parent or Guardian Name: \_\_\_\_\_

Full Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

## High School Information

Name of High School: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Career Counselor: \_\_\_\_\_ Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Current GPA: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_ Did you work your Jr. or Sr. Year? \_\_\_\_\_

If yes, when and how many hours per week? \_\_\_\_\_

## Church Information

Name of Your Church: \_\_\_\_\_ City: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

## Awards and Recognition (2021-2024)

Award 1: \_\_\_\_\_ Year: \_\_\_\_\_

Award 2: \_\_\_\_\_ Year: \_\_\_\_\_

Award 3: \_\_\_\_\_ Year: \_\_\_\_\_

Award 4: \_\_\_\_\_ Year: \_\_\_\_\_

Award 5: \_\_\_\_\_ Year: \_\_\_\_\_

Award 6: \_\_\_\_\_ Year: \_\_\_\_\_

## Extracurricular Activities: Activity, Sport, or Club, and the Office Held if any (2021-2024)

1. \_\_\_\_\_ Year(s): \_\_\_\_\_

2. \_\_\_\_\_ Year(s): \_\_\_\_\_

3. \_\_\_\_\_ Year(s): \_\_\_\_\_

4. \_\_\_\_\_ Year(s): \_\_\_\_\_

5. \_\_\_\_\_ Year(s): \_\_\_\_\_

6. \_\_\_\_\_ Year(s): \_\_\_\_\_

## Certification: Applicant must read and sign below to be eligible for consideration

I certify that all the information provided is complete and accurate to the best of my knowledge. I certify that I intend to be enrolled as a full-time student in an accredited college, vocational or technical school in the 2024 academic year. I authorize the Dana Michelle Pettaway Ministries, Inc., to share or publish my picture and application information for the purpose of recognition, fundraising, or public relations. I understand that all application materials become the property of Dana Michelle Pettaway Ministries, Inc. and will not be returned. Falsification of information or failure to attend an institution of higher learning as a full-time student in 2024 will result in revocation of the award granted. All decisions are final. I hereby certify that I have read this application and accept all conditions specified.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**2024 DANA MICHELLE PETTAWAY  
SERVANT'S HEART SCHOLARSHIP  
SERVICE HOURS**



**ELIGIBILITY**

**Name of Applicant:** \_\_\_\_\_

*Only hours earned during the years 2021-2024 will be accepted. Please make extra copies of this form as needed for additional organizations and hours. Only one organization per sheet. Information may be verified.*

**ORGANIZATION INFORMATION**

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor Name (Print): \_\_\_\_\_

Business Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**DETAILS OF SERVICE PROVIDED**

DATE OF SERVICE	# OF HOURS	DUTIES PERFORMED

**Supervisor: Please provide us with a short description of the volunteer's attitude, and any leadership qualities you may have observed. Please print legibly.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2024 DANA MICHELLE PETTAWAY  
SERVANT'S HEART SCHOLARSHIP  
APPLICATION CHECKLIST



NAME: \_\_\_\_\_

PLEASE USE THIS AS A CHECKLIST FOR YOUR COMPLETED APPLICATION,  
AND SUBMIT THIS PAGE AS PAGE 1 OF YOUR APPLICATION.

***Application Submission Checklist***

***A complete application consists of the following items. Place a check mark in front of each item to make certain your application is complete!***

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