

First United Methodist Church College Scholarship

SCHOLARSHIP APPLICATION DUE JULY 1

Date: _____

Applicant's Name: _____

Address: _____

Telephone: _____

College: _____

Field: _____

Church Membership and Activities: _____

Year of College Graduation (expected): _____

Statement of Reasons for Applying: _____

Occupational Goals: _____

(For Committee's Use)

Request Granted: _____

Amount Granted: _____

Date: _____

(Revised: 05/29/09)