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: _____

_____

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