

MUMC STANDARD SCHOLARSHIP APPLICATION

Please answer each question thoroughly to receive consideration. Please paper clip a current photograph of yourself to the top of this application so that we may identify you.

Which scholarship(s) do you wish to be considered for? (Check all that apply.)

- Barnhardt Family Marcia Clark Lakeson Scholarship Michael R. Maloney
 Prime Time Sylvia Strong Justin Tanger UMW

* A separate application must be completed for each scholarship you are applying for. *

Name _____
(last) (first) (middle)

Complete address _____

Telephone _____ (home) _____ (cell/other)

Year in school _____ Grade point average _____

College classification this fall: Freshman Sophomore Junior Senior
 Student with Special Needs Grad student

Anticipated graduation date _____

Marital/support status: Single/self supporting Single/parental support
 Married/shared support Married/parental support

Father's name _____ Mother's name _____

Father's occupation _____ Mother's occupation _____

Spouse's name and occupation, if applicable _____

List names, ages, and grade level of dependent children in family:

Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____

Name of college you attend/plan to attend _____

Have you received acceptance? _____ What will be your major? _____

Will you be enrolled for the academic year full-time? _____

Where will you be living while in school? On campus With parents Other _____
(specify)

If you are uncertain of your major, what are some of your academic interests? _____

List any organizations (school and community) with which you are involved, offices you hold, awards you have received, etc. _____

List any jobs you have had: full-time, part-time, after school or during summers.

Please describe the church ministries and activities you have been involved with (use a separate sheet if necessary): _____

Please provide us with a brief description of your educational and career goals:

List three (3) non-relative references:

1. _____

2. _____

3. _____

How long have you been a member of Matthews United Methodist Church? _____

I affirm that all the information on this application is true to the best of my knowledge, and that the funds given to me by the scholarship committee will be used solely for educational purposes.

SIGNATURE _____ **DATE** _____

SIGNATURES OF PARENT(S)/ GUARDIAN(S) OF DEPENDENT CHILDREN

_____ **DATE** _____

_____ **DATE** _____