

# MORROW

MEMORIAL UNITED METHODIST

# CHURCH

## APPLICATION FOR SCHOLARSHIP FUNDS

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Town, State: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email address: \_\_\_\_\_

Are you a Morrow Church member? \_\_\_\_\_

Were you confirmed? \_\_\_\_\_

High School \_\_\_\_\_

Graduation date \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Are your parents members of Morrow Church? \_\_\_\_\_

Names and ages of brothers/sisters:

\_\_\_\_\_

What area of study do you intend to pursue: \_\_\_\_\_

Schools you are considering:

1. \_\_\_\_\_ 2. \_\_\_\_\_

Have you made a decision \_\_\_\_\_

Other scholarships applied for: \_\_\_\_\_

List ways you been of service to your church: \_\_\_\_\_

\_\_\_\_\_

List ways you contributed to your school or community:

\_\_\_\_\_

Complete the following section if you would also like to apply for United Methodist Women scholarship funds:

List ways you been of service to the United Methodist Women:

Have you assisted with the Turnover Sale: \_\_\_\_\_

Have you attended the School of Mission for Youth in July: \_\_\_\_\_

Other: \_\_\_\_\_

Write a brief statement to submit with your application, sharing how (1) your faith and (2) the church have contributed to your life and values. (Be sure to include your name on the attachment.)

It is my understanding that the above information is kept strictly confidential. I agree that, in the event I am awarded a scholarship, I will use the money received directly for expenses involved in my educational endeavor.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return application and backup materials to The Scholarship Team by Friday, May 1, 2021.**

For office use:

Application received by deadline \_\_\_\_\_

Attachment received by deadline \_\_\_\_\_