SCHOLARSHIP APPLICATION Westminster United Methodist Church Kinston, NC

General Information

For the school year 2020-2021, the total for each scholarship is \$1,000, paid in \$500 increments over two semesters. Proof of enrollment will be required.

Each scholarship is administered by the Board of Trustees of Westminster United Methodist Church. It is designed to provide financial aid for two semesters to the applicant selected by this Board of Trustees. During the selection process emphasis is placed on Christian character and financial need (when applicable); however, all areas of the application will be taken into consideration. All parts of the application must be completed in full and received at the specified mailing address by the specified deadline.

Application deadline

Postmark by June 5th

Mailing Address

Westminster United Methodist Church Trustees Scholarship Committee PO Box 1007 Kinston, NC 28503

You may apply for all scholarships, but recipients can only be awarded one scholarship. While you do not have to be a member of Westminster UMC to be awarded a scholarship, greater consideration is given to WUMC members. Each scholarship is \$1000, paid in \$500 increments over two semesters. The following scholarships are available:

- Bruce Cannon Memorial Scholarship This scholarship was established in memory of Bruce Cannon.
- The Reverend Haywood A. Smith Scholarship This scholarship was established in honor of Reverend Haywood Smith.
- Sawyer-Wooten Memorial Scholarship This scholarship was established in memory of Pat Sawyer and Chip Wooten.
- Todd Howard Memorial Scholarship This scholarship was established in memory of Todd Howard.

SCHOLARSHIP APPLICATION

Westminster United Methodist Church Kinston, NC

INSTRUCTIONS FOR COMPLETING THIS APPLICATION FORM

Note: All four sections must be completed fully.

SECTIONS I AND II should be completed by the applicant and mailed to the address above.

<u>SECTION III</u>: Applicant should complete the top part and give page to the school principal for completion. Section III should be mailed to the address above.

<u>SECTION IV</u>: Applicant should complete the top part and give page to your pastor for completion. Section IV should be mailed to the address above.

NOTE: Application will not be considered unless all parts are fully completed.

SECTION I – APPLICANT INFORMATION (To be completed by applicant)

Applicant's Full Name							
Applicant's Address							
(Street)		(City)	(State)	(Zip)			
Applicant's Phone Number (_)						
Applicant's Email Address							
High School Applicant Attends		Location _					
Parents'/Guardians'/Name(s)							
Father's Occupation							
8. Father's Phone Number ()							
Father's Email Address							
Mother's Occupation							
Mother's Phone Number ()_							
Mother's Email Address							
Combined <u>annual gross income</u> of par □ \$15,000-\$30,000 □ \$30,000-\$50,000	ents/guardians (check on \$50,000-\$75,000 \$75,000-\$100,000	Ē	· · · · · · · · · · · · · · · · · · ·	0,000			
14. Number of dependents fully supported by your parents/guardians, including the applicant?							
Number of dependents attending colle	ge next year, including th	nan the applicant?					
How do you expect to pay your colleg	e expenses for next year?	' (Indicate % of to	otal by each item)			
 % Parents/Guardians % Personal Loans % Trust Funds % Scholarships already work 							
	Applicant's Address (Street) Applicant's Phone Number (Applicant's Email Address High School Applicant Attends Parents'/Guardians'/Name(s) Father's Occupation Father's Phone Number () Father's Email Address Mother's Occupation Mother's Cocupation Mother's Phone Number () Mother's Phone Number () Mother's Semail Address Occupation Mother's Phone Number () Mother's Occupation Mother's Semail Address Occupation Mother's Phone Number () Number of dependents income of par \$15,000-\$30,000 \$30,000-\$50,000 Number of dependents fully supported Number of dependents attending colle How do you expect to pay your colleg % Parents/Guardians % Parents/Guardians	Applicant's Address	Applicant's Address (City) Applicant's Phone Number	Applicant's Address			

SECTION I- APPLICANT INFORMATION (continued)

18. Name of college you plan to attend?							
Estimated cost per semester							
19. What is your intended major curriculum?							
20. For what do you plan to use this scholarship?							
21. Any other financial situations the committee should be aware of?							
22. References (name, address, phone number, position):							
1							
2							
23. Please discuss any other extenuating circumstance(s) you would like the selection committee to take under							
consideration							

Mail this section along with section II to the mailing address on the cover page.

SECTION II - APPLICANT'S STATEMENT (to be completed by applicant)

Applicant Name

In one hundred fifty words or less, write a statement that will help the committee in evaluating your qualifications. Include your reasons for wanting a college education and some statement as to what you consider your Christian life purpose to be. (This is your opportunity to convince the committee that you are their best choice for this scholarship. You may attach a separate sheet).

Date

SECTION III - HIGH SCHOOL RECORD

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participated?
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(The bottom section of this form should be completed by your principal or other school official and mailed to: Westminster United Methodist Church, PO Box 1007, Kinston, NC 28503.)

STATEMENT OF PRINCIPAL

1.	How does this student rank in comparison with the total senior class?							
	Number one Number two	First 10%	Upper 25%	Upper 50%				
2.	Weighted Grade Point Average:							
3.	Give any standardized test data:							

4. What recommendations would you make concerning this student? (You may attach a separate letter).

Date

Signature of Principal

SECTION IV - CHURCH RECORD

- 1. Applicant's Name
- 2. Which church do you regularly attend?
- 3. Are you a Member?
- 4. List church activities in which you participate or have anticipated ______

5. Have you held any offices within your church? If so, which and when._____

(The bottom section of this form should be completed by your pastor and mailed to: Westminster United Methodist Church, PO Box 1007, Kinston, NC 28503.)

STATEMENT OF PASTOR

Please comment on the religious background and character of this student and what recommendations you would make. (You may attach a separate letter).