

# SCHOLARSHIP APPLICATION

First United Methodist Church  
163 E. Wheeling St.  
Lancaster, OH 43130

## APPLICANT DEMOGRAPHICS

|                  |                               |
|------------------|-------------------------------|
| Applicant Name:  |                               |
| Date of Birth:   |                               |
| Current Address: |                               |
| Home Address:    | <input type="checkbox"/> Same |
| E-Mail Address:  |                               |
| Phone Number:    |                               |
| Parents' Names:  |                               |

## ACADEMICS

|                   |   |
|-------------------|---|
| Current School:   |   |
| School This Fall: |   |
| Class This Fall:  | <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate<br><input type="checkbox"/> Post-Graduate, describe: |
| College Major:    |   |
| High School:      | Cum GPA:                      Class Rank/Class Size:  |
| College:          | Cum GPA:  |
| Honors & Awards:  | List any academic honors or awards you have received in the past 2 years.   |

## CHURCH AND SERVICE

|   |  |
|---|--|
| FUMC Membership Status:                       | <input type="checkbox"/> Confirmed as a youth <input type="checkbox"/> Transferred from another church<br><input type="checkbox"/> Joined as a new member              |
| Percent Attendance, Last Year:                |  |
| Primary reason for not attending (check one): | <input type="checkbox"/> Work <input type="checkbox"/> Away at school <input type="checkbox"/> Extracurricular activities<br><input type="checkbox"/> Other, describe: |
| FUMC Activities:                              | List any FUMC church activities you currently participate in or participated in while in high school.  |
| Other Church or Campus Activities:            | List any church you attend regularly (other than FUMC), and other church activities or campus ministries you are involved in while away at school.                     |
| Community Service & Leadership                | List any community service you have performed or leadership positions you have held in the past 2 years.   |

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## FINANCIAL

|  |  |
|--|--|
| Annual Cost of Tuition:<br>(Do not include room/board)         | Tuition: \$  |
| Living Arrangements, This Fall:                                | <input type="checkbox"/> On-campus housing (for example, in a dormitory)<br><input type="checkbox"/> Off-campus housing (for example, in an apartment)<br><input type="checkbox"/> At home with parents or other relatives   |
| Method of payment:<br>(check all that apply)                   | <input type="checkbox"/> On my own (job earnings, savings) <input type="checkbox"/> Help from parents<br><input type="checkbox"/> Student loans <input type="checkbox"/> Grants <input type="checkbox"/> Scholarships <input type="checkbox"/> Work/Study<br><input type="checkbox"/> Other, describe: |
| Estimated Family Contribution<br>(EFC) from FAFSA Calculation: | EFC: \$  |

## OTHER INFORMATION

Use this space to explain any special circumstances that should be taken into consideration when reviewing your application, or to provide additional information not requested above that you would like the Scholarship Committee to know about you.

## \*\*REQUIRED ATTACHMENT\*\*

Please attach a copy of your high school transcript if you are a high school senior, or a copy of your most recent grade report with cumulative GPA if you are in college.

Signature of Applicant: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Return application no later than March 31 to:      **ATTN: BUSINESS OFFICE**  
**FIRST UNITED METHODIST CHURCH**  
**163 E. WHEELING ST.**  
**LANCASTER, OH 43130**

|                         |                                |  |
|-------------------------|--------------------------------|--|
| <b>OFFICE USE ONLY:</b> | Documented attendance: _____   | Award recipient last year : <input type="checkbox"/> Yes <input type="checkbox"/> No |
|                         | Documented member, year: _____ | Amount received last year: _____   |