

First United Methodist Church

1001 Fifth Avenue

Conway, South Carolina 29526

SCHOLARSHIP APPLICATION

Name: _____ Date: _____

Address: _____

Parents: _____

Social Security Number: _____

Graduation Year: _____ High School Attended: _____

SAT (ACT) Scores: Verbal _____ Math _____ Total _____ Test Date _____

Verbal _____ Math _____ Total _____ Test Date _____

Class Rank _____ GPA _____

College Major: _____

Freshman _____ Sophomore _____ Junior _____ Senior _____

Have you applied for other scholarships? Yes _____ No _____

Do you have an ongoing scholarship? Yes _____ No _____

During your high school years, please describe your involvement in:

- a. First United Methodist Activities and attendance:

b. Other church and Christian related activities:

c. Community:

d. School and extracurricular activities:

List any special recognition, awards and honors you have received:

Describe other factors in your life that you would like to share with the committee when it considers your application.

Application and a copy of your transcript are due in the church office by **APRIL 15TH**.

First United Methodist Church
c/o Scholarship Committee
1001 Fifth Avenue
Conway, South Carolina 29528

Applicants Signature _____ Date _____