

**Abilene First United Methodist Church**  
601 N. Cedar  
Abilene, KS 67410  
Telephone: 785-263-2623 Fax: 785-263-3427

**SCHOLARSHIP APPLICATION FORM**  
**for First-Time Applicant**

**Application deadline: 12:00 noon, April 13, 2012**

These awards are available to high school seniors in good standing or individuals pursuing post-high school education. First consideration may be given to individuals affiliated with the Abilene First United Methodist Church, with secondary consideration made to individuals affiliated with the United Methodist Church, and then to individuals active in Christian service through other denominations.

Applications will be prioritized:

1. high school seniors
2. undergraduate students
3. graduate students

Scholastic achievement, as determined by GPA, and financial need will be considered along with demonstrations of proper motivation, citizenship, and good moral character.

The student must be planning to attend or attending an accredited institution of post high school level.

**Checklist for a Complete Application**

\_\_\_\_\_ **First-time applicants must complete and submit the three (3) page application form which follows this page of instructions.**

\*\*Prior recipients should submit an alternative one-page application and current transcript.\*\*

\_\_\_\_\_ **Copy of current transcript**

\_\_\_\_\_ **Three (3) recommendation forms**

**Return to: First United Methodist Church Office**  
**Attention: Becki Stredney**  
**601 N. Cedar**  
**Abilene, KS 67410**

**\*\*This application must be completed in full and submitted to the church office by 12:00 noon, April 13, 2012, to be eligible for consideration.\*\***

Retain this page for your records.

# Abilene First United Methodist Church

## SCHOLARSHIP APPLICATION FORM for First-Time Applicant

### GENERAL INFORMATION

Date \_\_\_\_\_ Rank in Class \_\_\_\_\_

Cumulative Grade Point Average \_\_\_\_\_

ACT Composite \_\_\_\_\_

Name \_\_\_\_\_ Birthdate Mo/\_\_\_\_Day/\_\_\_\_Year/\_\_\_\_

Current Address \_\_\_\_\_ Phone \_\_\_\_\_

Year of high school graduation and high school attended \_\_\_\_\_

Father's Name \_\_\_\_\_ Employment \_\_\_\_\_

Mother's Name \_\_\_\_\_ Employment \_\_\_\_\_

Are you married? Yes \_\_\_ No \_\_\_ If so, Spouse's name: \_\_\_\_\_

Number of Brothers \_\_\_\_\_ Ages \_\_\_\_\_ Number of Sisters \_\_\_\_\_ Ages \_\_\_\_\_

Number of siblings currently enrolled in post high school education \_\_\_\_\_

College or school you plan to attend \_\_\_\_\_

Course of study \_\_\_\_\_ Projected graduation date \_\_\_\_\_

### — AGREEMENT —

#### APPLICANT: PLEASE READ CAREFULLY AND SIGN

I understand that if I am selected for an award:

- I shall use the money for college expenses.
- If I should drop out of college at any time during the first semester, I agree to repay the full amount that I received to the Scholarship Fund .

\_\_\_\_\_  
Applicant's Signature

**FINANCIAL**

What full or part-time employment have you had during the last 2 years? \_\_\_\_\_

\_\_\_\_\_

Do you plan to work part-time while attending school? \_\_\_\_\_

**REFERENCES**

Contact at least three people who can testify as to your eligibility for an award (based on need, scholastic ability, and character). High school teachers or principal, college instructors, businessmen, and former employers are useful contacts. **DO NOT USE RELATIVES.**

	<b>Name</b>	<b>Position</b>	<b>Telephone #</b>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Contact the above persons and get permission to use their names. Give each of them a recommendation form and a stamped envelope addressed to:

Abilene First United Methodist Church  
Attention: Becki Stredney  
601 N. Cedar  
Abilene, Kansas 67410

**Ask your references to return the completed form by 12:00 noon, April 13, 2012.**

Church Affiliation \_\_\_\_\_

Church Activities \_\_\_\_\_

HONORS & AWARDS RECEIVED through school, church, community, scouting, etc. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SCHOOL ACTIVITIES you have participated in \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## AUTOBIOGRAPHICAL SKETCH

Name of Applicant \_\_\_\_\_

In your own handwriting, answer the questions in the space below .

1. How have your activities within your church, community, and school affected your education and career goals?

2. Describe any pertinent information concerning the financial assets and obligations of your family that would be helpful in assessing your financial needs.

