# **SCHOLARSHIP APPLICATION**

# **The Missouri United Methodist Church Foundation**

204 S 9th St, Columbia, Missouri 65201-4818 or [scholarships@moumc.org](mailto:scholarships@moumc.org)

**Personal Information**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Social Security Number\_\_\_\_\_\_\_\_\_\_\_

Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_ZIP\_\_\_\_\_\_\_\_\_\_

Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital Status\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No. of Dependents\_\_\_\_\_\_\_\_\_\_\_Birthdate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Address of Church to which you belong\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Academic Information**

Seminary you will attend in the next academic year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Year: 1st( ) 2nd( )\_\_\_\_\_\_\_\_\_\_\_\_3rd( )\_\_\_\_\_\_\_\_\_\_\_4th( )

Major/Degree Program\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No. hours completed\_\_\_\_\_\_

Number of credit hours in which you plan to enroll in the next school year:

Fall Semester: Spring Semester\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Financial Information**

Total cost of tuition, fees, books, room & board at your institution is: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Of the amount above, how much will be paid for by *grants or scholarships* supplied by the institution, the government or other private sources? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(do not include loans.)

If you have outstanding debt, please list the total amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(do not include mortgage debt).

What portion of this total is student loan debt?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit card debt?\_\_\_\_\_\_\_\_\_\_

Is this a renewal request? \_\_\_\_\_\_\_Yes\_\_\_\_\_\_\_No

Please describe your financial situation and how scholarship assistance will be of use to you:

(Optional)

Please provide any additional information relating to your need for financial assistance that you would like the Scholarship Committee to consider:

Submit an official transcript of your college credits to the Scholarship Chair of the Foundation at the address on page **1 by June 30.**

Submit two letters of recommendation from persons, not relatives, who know you and your potential, to the Scholarship Chair of the Foundation at the address on page 1 by **June 30.**

Attach a recent photograph with your application (suitable to publication with announcements/press releases).

I have answered the above questions and requests for information truthfully and accurately to the best of my ability.

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_