

MARY SMATHERS WARD SCHOLARSHIP
FIRST UNITED METHODIST CHURCH
VERO BEACH, FLORIDA
APPLICATION
(PLEASE PRINT CLEARLY)

NAME: _____ DATE: _____

E-MAIL ADDRESS: _____

PERSONAL CELL NUMBER: _____

MAILING ADDRESS:

STREET: _____

CITY: _____ STATE: _____ ZIP: _____

PARENTS' TELEPHONE NUMBER(S): _____

DATE OF BIRTH: MONTH: _____ DAY: _____ YEAR: _____

I AM A MEMBER OF FIRST UNITED METHODIST CHURCH, VERO BEACH: _____ YES _____ NO

LIST INVOLVEMENT IN FUMC, VERO BEACH:

This Fall, I will be a: FRESHMAN SOPHOMORE JUNIOR SENIOR GRAD STUDENT OTHER

I WILL BE ATTENDING THE FOLLOWING INSTITUTION OF HIGHER LEARNING THIS FALL:

MAJOR OR DEGREE SOUGHT:

GRADE POINT AVERAGE (ON A 4.0 SCALE) OF PREVIOUS ACADEMIC YEAR: _____

(OR STATEMENT OF ACHIEVEMENT – GRADUATE STUDENTS ONLY)

MY PROJECTED (college/university) GRADUATION DATE: _____

NAME AND ADDRESS OF PARENT(S) OR LEGAL GUARDIAN(S):

NAME: _____

STREET: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL ADDRESS OF PARENT(S): _____

ESTIMATED COSTS FOR TUITION, FEES, BOOKS, ROOM & BOARD PER YEAR: _____

LIST FINANCIAL ASSISTANCE (other than this scholarship) YOU WILL RECEIVE *PER SEMESTER*:

PERSONAL: AMOUNT: \$ _____

OTHER SCHOLARSHIP(S): AMOUNT: \$ _____

STUDENT LOAN(S): AMOUNT: \$ _____

OTHER RESOURCES: AMOUNT: \$ _____

College/University STUDENT I.D. NUMBER: _____

ADDRESS OF THE BURSAR'S OFFICE AT YOUR INSTITUTION (OR FINANCIAL OFFICE WHERE THIS SCHOLARSHIP CHECK SHOULD BE SENT):

NAME OF OFFICE: _____

STREET: _____

CITY: _____ STATE: _____ ZIP: _____

LIST ACADEMIC HONORS, AWARDS AND MEMBERSHIPS:

***FIRST-TIME APPLICANTS:** HOW HAS YOUR PERSONAL FAITH INFLUENCED YOUR FUTURE EDUCATIONAL AND CAREER PLANS? (APPROXIMATELY 300 WORDS) (attach separate sheet)

***RETURNING APPLICANTS:** IN A BRIEF PARAGRAPH, EXPLAIN HOW YOUR FAITH HAS GROWN DURING THE PAST YEAR. (attach separate sheet)

signature

date

QUESTIONS: CONTACT SCHOLARSHIP CHAIRPERSON

Carol Wilson

e-mail: camero445@comcast.net

phone: 772-562-4043

**** PLEASE COPY THE APPLICATION AND SEND A HARD COPY TO THE ADDRESS LISTED BELOW:**

The following items must be attached to this application. *Please initial inclusion at each bullet.*

- _____ Completed, signed application form (this form)
- _____ Freshmen only: copy of letter of acceptance from your college/university
- _____ Copy of most recent transcript with cumulative grade point average (all applicants)
(Freshmen may submit a copy of high school transcript)
- _____ Letter of recommendation from a teacher, professor or member of the FUMC staff. (**FIRST TIME APPLICANTS ONLY**)
- _____ Faith statement **or** faith update as explained above. (*)
- **Packet must be received at FUMC Office by 5:00 p.m. on deadline date of 4/30/2019.**

First United Methodist Church
 Attention: Scholarship Committee
 1750 Twentieth Street
 Vero Beach, Florida 32960
 FAX: 772-562-1970