

Oak Grove United Methodist Church
Connect, Grow, and Serve

Scholarship Application for Financial Assistance

Thank you for applying to the **Oak Grove United Methodist Scholarship Fund**. This fund was established through donations for the purpose of providing critical assistance to applicants seeking to better themselves through formal education.

Please complete the application carefully and completely, providing all the requested information. The thoroughness and neatness of your application will be considered when making the final determination.

By signature of this application it is assumed that the information you provide will be released to the members of the Endowment/Scholarship Committee for their confidential use in evaluating the relative merits of each application.

1. Personnel Information:

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Telephone Number _____

Marital Status _____

Name and Ages of Dependents

II. Educational History:

Please list names and locations of all schools, trade schools, or colleges you have attended beginning with high school.

School	Date	Degree Awarded
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If you are applying for scholarship aid, what diploma, degree, certificate or license is your educational objective?

At what school, college or other training institution do you intend to pursue your educational objective?

Have you been officially accepted into this program? If so attach a copy of the letter or acceptance. If not, attach any other correspondence that confirms your educational plans.

If you are applying for renewal of scholarship aid, or if your educational program is already underway, attach a copy of your last semester's grade report.

III. Work History:

List your last three places of employment, beginning with the most recent.

IV. Community Involvement:

List the areas where you have contributed to bettering the community.

V. Describe in the available space why this scholarship is necessary and how your education will serve the community of God.

Sources of funding for studies:

Personal savings _____% Student Loans _____%

Parents/Family _____% Employment _____%

Other Scholarship _____% This application _____%

List any special needs you might have for these scholarship funds.

Name and address of where notification or award letter should be sent.

A check will be mailed directly to the educational institution. Please provide name and address of the educational institution where the award should be sent.