

SCHOLARSHIP APPLICATION

**EASTERN PA CONFERENCE
SCHOLARSHIPS**
GRADUATE:
 Longenecker
 Garrett
 Merit
 UM Foundation
UNDERGRADUATE:
 Garrett
 Merit
 Ruck
 Albright College
 BMCR/Black UM Preachers

Eastern PA Conference
 The United Methodist Church
 P.O. Box 820
 Valley Forge, Pa. 19482-0820

___ First-time Applicant
 ___ Second/More Applicant

 ___ Undergraduate
 ___ Graduate

FOR EASTERN PENNSYLVANIA CONFERENCE SCHOLARSHIPS ONLY

NOTE:

- Please note all applicants **must** be a member of a United Methodist Church in the Eastern PA Conference for at least 2 years prior to application.
- Application packet **MUST be postmarked** no later than March 1 for Fall awards and no later than October 1 for Spring awards (undergraduate and graduate).
- E-mailed information will not be accepted.
- Confirmation form will be mailed within 2 weeks of receipt of application.
- Must be full-time – 12 hours or more.
- Must have minimum 2.5 cumulative Grade Point Average (GPA).
- Transcript – unopened with each application.

(Please type or print clearly.)

Social Security Number _____ Undergraduate _____ Graduate _____

Name in Full _____ Male _____ Female _____

Permanent Address _____
Street/Box # City State Zip + 4

Mailing Address While in School _____
Street/Box # City State Zip + 4

Age _____ Married _____ Single _____ Telephone (_____) _____

Cell (_____) _____ E-mail: _____

Age(s) of Dependents(s) _____

Are you a citizen or permanent resident of the USA? _____
If permanent resident, list Alien Registration Receipt Card Number above

School you will attend during scholarship year _____

Address of Financial Aid Office _____
Street/Box # City State Zip + 4

Undergraduate Academic Classification (scholarship year) Freshman Sophomore Junior Senior

Graduate Academic Classification (scholarship year) First Second Third Other

Will you be full-time? _____

When will you graduate? _____ Degree _____ Final education goal _____

For what career are you preparing? _____

Special ethnic scholarship qualification: I am: Asian Black Hispanic Native American/American Indian
 Pacific Islander Other

Full name and mailing address of the United Methodist Church you joined _____

Street/Box# _____ City _____ State _____ Zip+4 _____

How long have you been a member of this church? _____

Full name and mailing address of the United Methodist Church where you are currently an active member:
If different from above, when did you transfer? _____

_____		_____	
name		Street/Box #	

Current Annual Conference _____			
city	State	Zip + 4	

Current Pastor's name _____ Telephone (____) _____

Describe your participation in projects and activities of church and/or community including any church activities at the Annual Conference, Jurisdictional, and/or National level.

Institutions of Higher Education Attended – list present school first:

Institution	Dates attended from-to	Degree Earned	Major	Grade Point Average

Have you received previous scholarship(s) administered by the Eastern PA Conference? Yes No
If "Yes," list scholarship name(s) and academic year awarded:

Have you applied at the UMC General Board of Higher Education and Ministry (www.gbhem.org), the national United Methodist Foundation (www.umc.org), or the General Board of Global Ministries (www.gbglm.org), or any UMC that provides scholarships? Yes No

THIS FORM MUST BE COMPLETED EVERY YEAR.

FINANCIAL STATEMENT

This statement must be completed before
your scholarship request can be reviewed.

FINANCIAL AID IS REQUESTED FOR ACADEMIC YEAR BEGINNING _____

INCOME AVAILABLE to meet expenses for the academic year: **ESTIMATED EXPENSES** for the academic year:
 On Campus Off Campus

Personal funds (cash, savings, etc.) <i>(exclude retirement funds and accounts)</i> Total summer earnings \$ _____; amount available for school _____ Expected earnings for academic year* _____ Parental support _____ Spouses income* _____ Assistantships _____ Grants/Scholarships (itemize with name, amount and year) _____ _____ _____ Loans (itemize with name, amount and year) _____ _____ _____ Other Income (itemize) _____ _____ _____ _____ _____ TOTAL INCOME \$ _____	\$	Tuition _____ Fees _____ Books _____ Room and board _____ Other school related expenses _____ Housing _____ Food _____ Clothing and laundry _____ Medical care _____ Transportation (itemize) _____ _____ Other expenses (itemize) _____ _____ _____ TOTAL EXPENSES \$ _____	\$
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Please note: On a separate sheet describe any unusually high expenses. (Additional itemized expenses may also be listed). Special circumstances that may affect your financial situation should be explained.

* After all taxes have been deducted.

I certify that to the best of my knowledge, the information contained in this statement is correct and complete. I understand it is my responsibility to ensure all supporting documentation (official transcripts, references, etc.) is received by the Eastern PA Conference no later than the appropriate deadline date.

 (Signature of student in full) (Date)

 (Name of school where you plan to enroll)

The Scholarship Team strongly encourages applicants to apply for funding from other sources.