



SCHOLARSHIP APPLICATION

PURPOSE

The SUMC Scholarship Fund provides financial support for current members of our church who are enrolled in or plan to enroll in accredited institutions of higher learning.

QUALIFICATIONS

- Is an involved member of SUMC.
- Is an active member of school, community and volunteer activities as applicable.
- Has strong academic standing.
- Plans to pursue a certification or degree in an accredited public or private program. Special consideration will be given to schools sponsored by the Methodist Church.
- Will be attending the institution either full-time or part-time. Minimum 6 credit hours
- Present a **completed application** by **May 1** (include an essay on “How SUMC has influenced my life”).

APPLICATION PROCESS

- Application form will be available in the church office or from the youth director after March 1.
- Completed application along with reference letter **must** be returned to the Scholarship Committee at the church office or youth director by May 1.
- Application must include a one-page essay on “How SUMC Influenced My Life”.
- One letter of recommendation (NOT from a family member) must be mailed separately to: SUMC Scholarship Fund, 10700 Johnson Dr, Shawnee, KS 66203

CONTRIBUTIONS

Gifts are to be given to the SUMC Scholarship Fund. All funds are non-restrictive exclusively to SUMC Scholarship Funds. Your donations help us help our members expand and enhance their educational opportunities. Those opportunities in turn enrich the lives of their families and our community.

SHAWNEE UNITED METHODIST CHURCH

Scholarship Application

Personal Information

Name _____ Date of Birth _____

Address _____
Street _____ City _____ State _____ Zip Code _____

Telephone _____ E-Mail _____

High School _____ GPA _____ Date of Graduation _____

Post High School Education (if applicable) _____

Institution Address _____

Dates Attended _____ Degree/Certification _____ GPA _____

Church Activities _____

Extra-curricular School Activities (if applicable) _____

Community and Volunteer Involvement _____

Work Experiences _____ from _____ to _____
_____ from _____ to _____

Educational Information

Institution Planning to Attend _____

Address _____
Street _____ City _____ State _____ Zip Code _____

Career Objectives _____

Additional Scholarships, Loans, Other Sources of Funding _____

Credits Planned: Summer _____ Fall _____ Spring _____ Cost per Credit Hour _____

Student Fees _____

Number of SUMC Scholarship Grants obtained _____ (4 maximum)

Personal Reference (NOT a family member)

Name _____

Address _____
Street _____ City _____ State _____ Zip Code _____

NOTES:

- Attach extra page(s) as needed
- Recipients will be notified by May 15
- Scholarship funds will be sent to the institution's financial aid office
- Funds are to be used for tuition, student fees and/or books only
- Unused funds will be returned to the SUMC Scholarship Fund
- There is a maximum of Four SUMC Scholarship per student that may be granted
- Please provide secondary contact information-Email and phone number (Parents)

COMPLETED APPLICATION MUST INCLUDE:

- Application form with all answers provided
- Essay on "How SUMC Influenced My Life"
- Letter of reference (to be sent to Scholarship Committee, SUMC, 10700 Johnson Dr, Shawnee, KS 66203
- Must be received no later than May 1 of application year

Signature

Date