

# BRADEN UNITED METHODIST CHURCH

## Scholastic Scholarship Application

\* Please note: application to be submitted in conjunction with high school/ college transcripts, proof of acceptance to higher education, letter of recommendation and a one to two page essay explaining why you are the best recipient for this scholarship.

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>ences.</i>	
Full Name	Relationship
Address	Phone ( )
Full Name	Relationship
Address	Phone ( )

**PREVIOUS SCHOLARSHIP RECIPIENT**

Have you previously received this award?                      YES         NO         If so, when?

If so, please explain (in the space provided below) why you deserve to receive a second award?

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**DISCLAIMER AND SIGNATURE**

Scholarship award is based upon application, high school transcripts, proof of acceptance to higher education, and one to two page essay.

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to a scholarship award, I understand that false or misleading information in my application or interview may result in revoking the award.

Signature

Date