** DEADLINE FOR APPLICATIONS IS SUNDAY, JANUARY 21, 2024 **

APPLICATION FOR A ST. PAUL'S UNITED METHODIST SCHOLARSHIP

St. Paul's United Methodist Church Monro		Monroe, Michig	oe, Michigan	
Name:	Phone Number:			
Address:				
Current Email Address:				
Date of Birth:	Where Born:			
Father's Name:	Mother's Maiden Name:			
Father's Occupation:	Mother's Occupation:			
Are you a member of St. Paul's United M	lethodist Church?			
What high school did you graduate from	?	Y	ear:	
What college are you attending?	Where:			
When did you enter college:	When do you expect to graduate:			
What is your intended major?				
Are you living in a: DormCo-op	Private Home	At home	Other	
College address:				
What scholarships and other grants are ye	ou receiving: Please list			
Have you, or are you planning to, borrow				
Are you working during the school year:	How many ho	ours per week, etc	2.	
Do you have a summer job: Desc	cription:			
What youth and church activities did you	participate in during you	r school years in	Monroe?	
What is your main purpose or goal in atte	ending college:			
Signature	D	Date:		
(Please attach a transcript or photostat of	your most recent grade re	eport).	Revised 11/17	
Scholarship applications are given	for undergraduate and	trade school pro	grams only.	