



## Aldersgate United Methodist Church College Scholarship Application (for School Year 2021-2022)

Application must be typed. Save form and return to [tuohig@gmail.com](mailto:tuohig@gmail.com)

Applicant is: ☐ Current Aldersgate Member  
☐ Child of Aldersgate Member  
☐ Non-Member but regularly attend Aldersgate

### Personal Information

Name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are You a U.S. Citizen ?      Yes ☐      No ☐

Sex:              M ☐      F ☐

Address (street) \_\_\_\_\_

(city, state, ZIP) \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

### Church Information

How long have you attended Aldersgate Church? \_\_\_\_\_

When did you become a member of Aldersgate? \_\_\_\_\_

In what Aldersgate Church activities have you participated (e.g. Guatemala Mission, Jeremiah Project, staff of Vacation Bible School, etc.)

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**Educational Information**

High School \_\_\_\_\_

Date graduated or will graduate \_\_\_\_\_ GPA \_\_\_\_\_

Extracurricular activities:

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Hobbies:

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Sports Activities:

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Name and address of college or university you plan to attend or are already attending (must be an accredited college or university established for higher learning.):

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Field of Study (desired degree):

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This is a ☐ 1 year ☐ 2 year ☐ 3 year ☐ 4 year program

**Community Activities**

Describe your participation in community activities (this may include but is not limited to community service programs, scouting, charity work, or other volunteer activities).

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**Financial Information**

Father's annual income: \_\_\_\_\_

Mother's annual income: \_\_\_\_\_

Number of dependent children in family: \_\_\_\_\_

Do you plan to work while attending school? ☐ Yes ☐ No

Have you applied for or received any other Financial Aid or Scholarships for this school year?

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Adult applicants are asked to list their own annual income and that of their spouse in place of the Father's and Mother's annual income.

Percent of contribution by your parents toward your education: \_\_\_\_\_

Estimated School Costs of your tuition \$ \_\_\_\_\_ and board \$ \_\_\_\_\_

**Other Information**

Is there any other information you want the Endowment Committee to know in considering your application? If so, please provide it here.

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**Certification**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Deadline for submission of application:**  
**Friday, April 30, 2021**

Save form and return to  
tuohig@gmail.com.

(Note: Information provided herein will be held in strict confidence.)