

**The Rev. John C. Blackford
Scholarship Fund**

Application for Scholarship Consideration

Date _____

Name in full _____

Current mailing address _____

Phone _____ Parents' Names _____

Of what church are you a member? _____

Address of church _____

Pastor's name _____

Pastor's address _____

Name of College you plan to attend _____

Have you received a Foundation Scholarship Award prior to this application? ___yes ___no

Education Background:

<u>Type</u>	<u>Name & Location of School</u>	<u>Course or Major</u>	<u>Years Attended</u>	<u>Average Grade</u>	<u>Name of Dean or Advisor</u>
High School	_____	_____	_____	_____	_____
College/ University	_____	_____	_____	_____	_____
Seminary	_____	_____	_____	_____	_____

Note: *A copy of your most recent high school or post secondary transcript must be submitted with this application.*

Estimate your expenses for the coming school year:

Tuition: _____
 Books: _____
 Food/Lodging: _____
 Transportation: _____
 Other (itemize): _____

Total School Year: _____

Indicate amount of funds available from the sources below: *

** Estimate if necessary*

Personal earnings: _____
 Parent support: _____
 Scholarship(s): _____
 Grant(s): _____
 Loan(s): _____
 Other: _____

Tot. Funds available: _____

Please explain in some detail your feelings about your financial needs:

Please indicate your future education plans including the reasons for choosing this career and ways in which you expect to be of service to mankind (you may use additional sheets if necessary):

List your church and community service:

What are your hobbies and interests?

Submit completed application in person to the church office or mail it to:

*First United Methodist Church Foundation
P.O. Box 688
Lindstrom, MN 55045*

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