

ST. ANDREW'S UNITED METHODIST CHURCH SCHOLARSHIP APPLICATION

APPLICANT INFOR	MATION								
Name:			Church N	/lember?	☐ Yes	□ No	How long?		
Address:			City:					Zip:	
Phone #:			Email A	ddress:					
School Attending:			Area of Study:						
Would you be willing	ost-secondary e	education experience at a later date?					□ Ye	es 🗌 No	
WRITING SECTION									
Describe one of your	favorite memor	ies at St. Andre	ew's UMC:						
Signature of Schol		nt:							
FOR CHURCH USE	ONLY				ī				
Date Application Received:			_		B				
Applicant recommended for scholarship funding?				Yes	Γ	No			
Notes:									

St. Andrew's United Methodist Church, 9801 Fort King Road, Richmond, VA 23229 (804) 270-2869