

UMHEF Scholarships Administrator • P.O. Box 340005 • Nashville, TN 37203-0005 • (615) 649-3990 • (800) 811-8110 umhefscholarships@umhef.org • www.umhef.org

NAMED ENDOWED SCHOLARSHIPS GENERAL APPLICATION GUIDELINES

The United Methodist Higher Education Foundation (UMHEF) General Application is used for a number of named scholarship funds established by various donors. Some of the funds stipulate that applicants meet certain eligibility criteria, i.e., resident of specific conference, majoring in specified field, etc. Scholarship fund descriptions are available at www.umhef.org. **Please send only one application.** Applicant will be considered for only one award from UMHEF funds during an academic year.

DEADLINE: Application and all required documents must be postmarked no later than March 1.

Applications will be accepted beginning January 2 each year for the following academic year. <u>Faxes or photocopies of completed application and supporting documentation will not be accepted.</u>

BASIC CRITERIA FOR ELIGIBILITY FOR ALL SCHOLARSHIPS

- Must be an active, full member of The United Methodist Church for at least one year prior to applying. Members of other Methodist denominations are not eligible. International students must be attending a United Methodist-related institution in the United States.
- **Must be enrolled or planning to enroll in a full-time degree program** (graduate or undergraduate) at a regionally accredited educational institution in the U.S. <u>Priority is given to applicants enrolled or planning to enroll in a United Methodist-related institution</u>. Doctoral (PhD) candidates are not eligible.

APPLICATION PROCESS

- **Complete in full.** Every question must be answered and all sections of the form must be completed; <u>please</u> type or print legibly.
- Applications **not** complete by the deadline date will **not** be considered by the Scholarships Committee.
- An **Official Transcript** (no copies) of your most recent academic work (with grades through Fall Semester) must be submitted with your application.
- **Letters of Recommendation** Instructions for each letter are printed on page 5 of the application. It is important that these letters be enclosed with your complete application when it is mailed to UMHEF.
- **Applicant's essay** On a separate sheet of paper, write an essay of 200 words or less, including information as indicated in Applicant's Essay Guidelines on page 5 of the application.
- **SEND ONLY ONE APPLICATION**. Applicant will be considered for only one award from UMHEF funds during an academic year. Scholarship fund descriptions are available at www.umhef.org.
- You are urged to have your completed application (including transcript, recommendation letters and essay) in the UMHEF office at least one month before the **deadline date of March 1.**
- Mail completed application and required documents to:

United Methodist Higher Education Foundation **UMHEF Scholarships Administrator** P.O. Box 340005 Nashville, TN 37203-0005



UMHEF Scholarships Administrator • P.O. Box 340005 • Nashville, TN 37203-0005 • (615) 649-3990 • (800) 811-8110 umhefscholarships@umhef.org • www.umhef.org

NAMED ENDOWED SCHOLARSHIPS GENERAL APPLICATION

Student's name	e			· · · · · · · · · · · · · · · · · · ·		
	mefirst		middle		last	
Social Security	#		Birthdate	//	Age	☐ Male ☐ Female
Permanent Mai	lling Address				E-mail	
City			State	Zip	Phone	
Ethnic group:	☐ Caucasian	☐ Asian	☐ Black	☐ Latin	American/Hispanic	Pacific Islander
	☐ Native Amer	ican/Native A	laskan 🔲	Other		
Full name of so	chool and city/state	where you p	lan to be enroll	ed in the fal	1:	
Name of school				City/St	ate	
Academic class	sification in the co	ming fall sem	ester:			
Underg	raduate:	☐ Freshman	□ Sopho	omore	□ Junior □ ;	Senior
Semina	ry/Graduate/Profe	ssional:	First	ond \Box Th	nird Other	
Will you be em	rolled full-time in	the fall?		GPA (most	recent transcript) _	
Degree working	g toward (i.e. BA,	MA, MDiv)		Major		
For what career	r are you preparing	g?				
If you are enrol	lled in Seminary, d	o you plan to	serve as an	Elder or	☐ Deacon?	
What is	your conference s	tatus?	☐ Certified Car	ndidate 🗖	Local Pastor Licen	se
	☐ Associate Mem	ber 🖵 Prob	oationary Memb	er 🖵 Full	Member	

02/11 2 of 6

Are you a full and acti	ve member of The United	Methodist Churc	h (for at least one y	ear)? Yes No		
Name of church where	e you are currently an activ	ve member				
Church Mailing Address Annual Conference						
City		State	_ Zip	Phone		
Pastor's Name		E-mail		Phone		
Institutions of Higher Ed	lucation Attended; list curre	nt school first:				
Institution		Degree Earne	Ų	Grade Point Average		
·	•					
What factors, if any, sho	ould be taken into considerati	ion in evaluating yo	our academic record?			
				nent you have had or now have:		
Title or Position	Employed by		Type of Work	Dates		
Father's name			Occupation			
Mailing Address	Street Address or PO Bo					
				y/State/Zip Code		
			_			
Mailing Address	Street Address or PO Bo	ox	City	y/State/Zip Code		
	24, check the range of your					
□ \$0-\$24,999	□ \$25,000-\$49,999 □	\$50,000-\$99,999	□ \$100,000-\$149	9,999 🗆 \$150,000+		
Please indicate whose in	come is reflected in this amo	ount				
If applicant is under age	24, indicate how many pers	ons are dependent of	on your parents' incom	me and their ages:		

FINANCIAL STATEMENT

This statement must be completed before your scholarship request can be reviewed.

FINANCIAL AID IS REQUESTED FOR ACADEMIC YEAR ______ - ____

INCOME AVAILABLE to meet expen	ses for the academic year:	ESTIMATED EXPENSES	for the academic year:
Personal funds (cash, savings, etc.)	\$	Tuition and fees	\$
Total summer earnings \$		Books	\$
Summer earnings available for school	\$	Housing	\$
Expected earnings for academic year	\$	Food	\$
Parental support	\$	Clothing and laundry	\$
Spouse's net income, if applicable	\$	Medical care	\$
Assistantships	\$	Transportation (itemize)	
Scholarships (itemize)		- 	\$
	\$		\$
	\$		\$
	\$	Other expenses (itemize)	
	\$		\$
Grants (itemize)			Φ.
	\$		
	\$		
	\$		
Loans (itemize)			A
	\$		Φ.
	\$		\$
Other income (itemize)			
	\$	TOTAL EXPENSES:	\$
	\$		
	\$	Please note: On a separat	
	\$	unusually high expenses. (Additional itemized expenses may also be listed.) Special circumstances that may affect your	
	\$		
POTAL INCOME	Φ.	financial situation should	be explained.
FOTAL INCOME:	\$		
If you are a self-supporting student, list n	number of dependents (expl	lain)	
Have you applied for other financial a			
f yes, name sources	•		
If approved, list amount you will receive			
List educational loans unpaid for prior years: Source			Amount:
			Φ.
			Φ.
			_
			Φ

LETTERS OF RECOMMENDATION

Enter the name and relationship of the persons writing your letters of recommendation in the blanks below. **The letters of recommendation should be SIGNED and enclosed with your application**. If there is a question about this requirement, you may contact the UMHEF by email: umhefscholarships@umhef.org OR by telephone: 615-649-3990, or toll free at 1-800-811-8110.

1. The Pastor of the United Methodist Church where you are currently an active member. <i>If you are a student pastor or a certified candidate for ministry, the letter of recommendation should be from your district superintendent or supervising pastor.</i>
Name Relationship
2. A teacher/college professor/instructor who has taught you this academic year . If you have not been in school in the past two years, you may request this reference from a recent employer.
Name Relationship APPLICANT'S ESSAY GUIDELINES
Attach a written ESSAY in 200 words or less (must be typed or word processed) describing your leadership responsibilities and activities during the past three years, including your current activities and goals as follows:
• For Incoming Freshman: Involvement and/or leadership responsibilities in your church, high school, and community within the last three years
• For All Other Applicants: Involvement and/or leadership responsibilities in your church, college, and community within the last three years
APPLICANT'S PLEDGE
I understand that to the best of my knowledge , the information contained in this application is correct and complete. I understand it is <i>my responsibility</i> to ensure all requested documents (transcript, recommendation letters, essay) are received by UMHEF no later than the deadline date of March 1.
By submitting this application, you are giving UMHEF permission to use your picture and/or statement in print (e.g. public relations materials) to promote the Foundation, and also to release your information to external church-related sources (e.g. annual conference newspapers) for possible use in publications.
Student's signature/date
<u>Deadline</u> : Application and all required documents must be submitted by March 1. Faxes or photocopies of completed application and supporting documentation will not be accepted. This form may be reproduced. Applications may also be downloaded from www.umhef.org.
If you have questions, contact the UMHEF Scholarship Office by email: umhefscholarships@umhef.org OR by telephone: 615-649-3990, or toll free at 1-800-811-8110.
Mail completed application and required documents to: United Methodist Higher Education Foundation Scholarships Administrator

P.O. Box 340005

Nashville, TN 37203-0005

How did you hear about us?

☐ Parent or relative

Other:

☐ Church Pastor or Youth Minister

Our website, brochure or other promotional material?

5 of 6

APPLICATION CHECK LIST

UMHEF will **not** send an incomplete application to the Scholarship Review Committee. Read questions carefully to eliminate delays and the possibility of your application not being reviewed. Before mailing your application papers, read and check off the following:

Have you answered every question and/or written a response in every blank on the application?
Is your official transcript enclosed?
Are letters of recommendation signed and enclosed?
Have you enclosed your essay ?
Are you aware of the deadline date ?
Did you remember to sign the application?

You are urged to have your completed application (including transcript, recommendation letters and essay) in the UMHEF office at least one month before the **deadline date of March 1.**