

Grace United Methodist Church - Student Ministry
2026 SCHOLARSHIP APPLICATION

Student Contact Info

Name:

Address:

Phone Number:

Date of Birth:

Guardian One

Name:

Occupation:

of dependents & Ages:

Grace UMC Member?

Guardian Two

Name:

Occupation:

of dependents & Ages:

Grace UMC Member?

Student Education Plan

Postsecondary School of Choice:

Acceptance to Postsecondary School Received?

Summary of degree program & career plans:

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Academic Career:

High School & Graduation Date:

GPA:

SAT (Reading/Writing):

SAT (Math):

Description of Honors &/or Awards:

Faith Development:

I have been regularly connected to the following church programs:

- Sunday Morning Worship for ____ years
- Sunday School for ____ years
- Sunday Night Youth for ____ years
- Wednesday Night Youth Programs for ____ years
- GRITS/Small Groups/etc. for ____ years

I have served our congregation as a:

- Worship Support** Volunteer (traditional) for ____ years
- Worship Support** Volunteer (contemporary) for ____ years
- Nursery, BLAST, or Wednesday Night Kids Volunteer for ____ years
- Special Events Volunteer (VBS, RTB, outreach events, etc.)
- Other Ministry Area Volunteer for ____ years (detailed below)

Additional information about faith development at Grace:



**Worship Support Volunteers include, but are not limited to: crucifers, acolytes, vocalists, musicians, tech team members, greeters, ushers, communion servers, & any other serving opportunities that provide support within our worship services here at Grace UMC!

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Extra-Curriculars:

Please include a short description of all other school-related activities, extra-curricular activities, & employment, including the timeframe/weekly hours of each.

Financial Information:

Combined Annual Income (household, or both guardians, if applicable):

College Expense Estimates:

Tuition _____ Room & Board _____ Books/Supplies _____

How will your postsecondary education be primarily funded?

Are you eligible for any grants &/or student loans? If so, specify type & amount:

Have you been awarded additional scholarships for the upcoming academic year? If so, please provide a list of scholarship descriptions & amounts separately.

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Scholarship Selection:

I would like to apply for the following scholarships:

Women of Grace Scholarship (formerly United Methodist Women)

- Wallace & Marge Taylor Scholarship
- Michael Hargrove Scholarship
- Martin L. Terry & Sue Grigsby Terry Scholarship
- Bonnie Lucille Beneteau Scholarship
- Dr. W.G. Watson Scholarship
- Julie Ann Crawford Hendrick Memorial Scholarship
- A PDF of all scholarship descriptions & their recipient requirements is available: Go to gotgraceumc.org/youth & scroll to the bottom!*

On a separate sheet, please briefly describe why you need your selected scholarship, & why you feel you are a good candidate to receive this scholarship.

Confirmation:

I certify that all information submitted in this application is true, to the best of my knowledge & belief, & understand that scholarship awards & amounts are based on consideration of funds available as well as applications received.

Student Signature:

Date:

Note: This completed form, as well as any additional statements requested, must be returned to a Grace UMC staff representative on or before **Friday, April 17**. All information provided will be kept in confidence. Please contact a Grace UMC staff representative or member of the endowment committee for any needed clarification. Incomplete forms or unrequested attachments cannot be considered.