The Dr. John D. Blair Scholarship

Dear Scholarship Applicant:

For your information, listed below are the standards the committee uses to select the recipients of the DR. JOHN D. BLAIR SCHOLARSHIP.

Any information you can provide on your application form pertaining specifically to these areas will be very helpful. In addition, you must furnish a recent transcript of your high school and/or college grades with your application. Your application will not be considered without a transcript.

Applications must be submitted to the church office by the deadline published in the church newsletter.

DR. JOHN D. BLAIR SCHOLARSHIP STANDARDS

CHRISTIAN COMMITMENT - 50% of Total

- 10 9 Candidate has demonstrated Christian commitment by EXTENSIVE INVOLVEMENT in the church (worship attendance, church school, choirs, youth club, etc.) AND HAS CHOSEN TO PURSUE A CHURCH-RELATED VOCATION.
- 8 7 Candidate has demonstrated Christian commitment by EXTENSIVE INVOLVEMENT in the church.
- 6-5 Candidate has demonstrated Christian commitment by ABOVE AVERAGE INVOLVEMENT in the church.
- 4 -3 Candidate has demonstrated Christian commitment by AVERAGE INVOLVEMENT in the church
- 2-1 Candidate has demonstrated only MARGINAL INVOLVEMENT in the church.

FINANCIAL NEED – 30% of Total

- 10 9 There is a strong probability candidate will be UNABLE TO ATTEND COLLEGE without a great deal of financial help.
- 8-7 There are SERIOUS FINANCIAL NEEDS in meeting college costs.
- 6-5 There are financial needs, but this scholarship will only be helpful IN A MODEST WAY in meeting those needs.
- 4 3 Sufficient family or personal income will probably meet most college costs, and scholarship will SIMPLY LIGHTEN FINANCIAL BURDEN.
- 2-1 Scholarship funds are NOT NEEDED to meet college costs.

ACADEMIC PERFORMANCE – 20% of Total

10 - 9	EXCEPTIONAL student	A to A+
8 - 7	ABOVE AVERAGE student	B to B+
6 - 5	AVERAGE student	C to C+
4 - 3	BELOW AVERAGE student	D to D+
2 - 1	POOR student	Below D

First United Methodist Church Oakhurst, New Jersey THE DR. JOHN D. BLAIR SCHOLARSHIP APPLICATION FORM

I. PERSONAL INFORMATION

Name (Last, First, Middle)						
Home Address						
(City, State, Zip, Pho	one)					
Mobile Number			Email Address			
Date of Birth			Age			
Father's Name						
Mother's Name			Occup	ation		
Brothers and Sisters						
Name	Age	Grade		School	1	
II. HIGH SCHOO	L RECORD					
List High School(s) Attende	ed					
Name	Address		Dates		Graduation	
List high school activities in	which you hav	ve been i	nvolved	l and inc	dicate years	-
List any honors and/or awar	ds you received	d during	your hig	gh scho	ol years	
List any community or other church activities)	r activities in w	hich you	have b	een inv	olved (not includ	ling school or

Approxi	mate scholastic average in high school	
III.	CHURCH INFORMATION	
Date you	ı joined Oakhurst Church	Date of Baptism
List the o	church organizations to which you have b	pelonged and the years
List any	offices which you have held in church or	ganizations
	f these have you attended on a regular ba	
Worship	Services Church School Choi	ir Other
IV.	COLLEGE PLANS	
A. Com	plete this section ONLY IF YOU ARE	ENTERING YOUR FRESHMAN YEAR
What pro	ofessions are you considering?	
Why?		
At what	colleges have your been accepted as of the	nis date?
What co	llege do you plan to attend?	
B. Com		BEYOND YOUR FRESHMAN YEAR
Name of	College	Entering what year
College 1	Major	Minor(s)
What pro	ofession are you planning for?	
Why? _		

List activities in which you have been involved during college		
List any honors and	or awards received during co	ollege years
Where do you attend	d church at college?	
Church activities		
Plans for after colle	ge graduation	
Have you applied for	or this scholarship before?	If so, when?
V. FINANO	CIAL CONSIDERATIONS	3
What are your antic	ipated yearly college costs (F	Please itemize)
Tuition	\$	
Room and Board	\$	
Books	\$	
Transportation	\$	
Other	\$	
TOTAL	\$	
Will you live at hon	ne or commute?	_
How do you plan to	finance your college educati	on (be specific)
-	ny other financial assistance whom and the amount.	in the form of grants, loans, or scholarships?
Please indicate any	special financial hardships w	hich should be taken into consideration.

VI. RECOMMENDATIONS

Please list the names, positions, addresses and phone numbers of four persons who would be willing and able to provide a recommendation for you. Two of these persons must be professional staff members from your high school or college.

1.	Name
	Position
	Address
	Phone Number
2.	Name
	Position
	Address
	Phone Number
3.	Name
	Position
	Address
	Phone Number
4.	Name
	Position
	Address
	Phone Number

VII. PERSONAL TESTIMONIAL

In one or more well written paragraphs, please explain the following:

- 1. Why you have selected your field of study and/or profession.
- 2. Why you feel the committee should consider favorably your application.
- 3. Any additional information about yourself which you feel would help the committee in its decision.

(Use additional paper as necessary – Neatness and proper form will be considered.)

(Date)	(Signature of Applicant)	

Thank you for completing this application. The completed applications should be returned by mail or in person to: THE DR. JOHN D. BLAIR SCHOLARSHIP COMMITTEE, FIRST UNITED METHODIST CHURCH, 103 MONMOUTH ROAD, OAKHURST, NJ 07755