

St. Andrew United Methodist Church Scholarship Fund Application
815 Kanawha Terrace
St. Albans, WV 25177
304-727-7114

Name _____ Date of Birth _____
Address _____ City _____ St. _____ Zip _____
Telephone _____ Email _____
High School _____ City _____ State _____
Date of HS Commencement _____
Intended/Current College Major _____
College/University/Trade School _____ City/State _____
Estimated Tuition per year \$ _____
Estimated Room and Board per year \$ _____ Estimated Books per year \$ _____

Please include any special financial needs and the intended use of the Scholarship money you may receive and include them as an attachment to this application. Also if you are receiving other financial assistance, please provide detailed information on an attachment to this application.

Please send the requested information to:

St. Andrew United Methodist Church
Attn: Scholarship Committee
815 Kanawha Terrace
St. Albans, WV 25177

Confidentiality: All information submitted as part of the scholarship application and recommendations will be held in confidence by the scholarship committee and the employees of St. Andrew United Methodist Church.

The information set forth above is true to the best of my knowledge.

(Applicant's Signature)

(Date)