



Garris Chapel United Methodist Church

Sherwin Herring Student Scholarship Fund

SCHOLARSHIP APPLICATION Applications must be filled out COMPLETELY

Name _____
Last First Middle

Mailing Address _____
Street City State Zip Code

Phone Number _____
Home Mobile E-mail Address

Social Security Number _____ - ____ - _____ **Date of Birth** _____

Date joined Garris Chapel UMC _____

High School Attended _____ **Graduation Date** _____
School Name Month/Year

Principal (_____) Phone

Street Address City State Zip

Name of post-secondary school you plan to attend:

City State

Post Secondary School Data:

___ 4 Yr. College/University ___ 2 Yr. Community/Jr. College
___ Vocational ___ Other

Major or course of study _____

Anticipated date of graduation _____

Student will ___ live on campus ___ live off campus ___ commute from home

If a public institution, applicant will pay ____in-state tuition ____out of state tuition

Work Experience

Describe your work experience during the past three years. Indicate dates of employment in each job and approximate number of hours worked each week. List amounts earned at each job.

Company/Position From- Mo/Yr To-Mo/Yr. Hrs./Week Amt. Earned

List all community and church activities in which you have participated without pay during the past four years (e.g. MYF, Missions, Red Cross, community volunteer work, etc.)
Please use the reverse of this page if additional space is needed.

Church Activities & Other

Activity	# of Years	Description

List all school activities in which you have participated during the past four years (e.g. student government, music, sports, etc.) Indicate all special awards, honors, and offices held. *Please use the reverse of this page if additional space is needed.*

Activities Awards & Honors

Activity	# of Years	Offices Held

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Special Awards and Honors _____

**Unusual
Circumstances**

Please report any unusual family or personal circumstances that have affected your achievement in school, work experience, or your participation in school and community activities. _____

**Goals &
Aspirations**

Attach a statement of your plans as they relate to your educational and career objectives and future goals.

**Transcript
Information**

Cumulative grade point average _____/4.0 scale

SAT Results _____ Verbal _____ Math

ACT Results _____ English _____ Math

School Official's Signature _____

Title _____ Date _____ Phone _____

**Application
Checklist**

- ___ Student Application
- ___ Statement of Goals & Aspirations
- ___ Current Transcript of Grades

Certification

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted. This application becomes the property of Garris Chapel United Methodist Church.

Applicant's Signature _____ Date _____

Return Application to:

Pastor Adam Seate
Garris Chapel United Methodist Church
823 Piney Grove Church Road
La Grange, NC 28551
252-566-4355 www.garrischapel.com

Searching Inward...Looking Upward...Reaching Outward