

# United Methodist Scholarship

General Board of Higher Education and Ministry  
The United Methodist Church

## Certification of Church Membership

(Student: Complete first two lines and then give/mail to your pastor)

This is to advise that \_\_\_\_\_ DePauw University

Methodist Scholarship at \_\_\_\_\_  
Name of college street/box # city state zip + 4

### Confidential Information to be Supplied by Pastor

RETURN THIS FORM TO THE UNITED METHODIST SCHOLARSHIP  
REPRESENTATIVE OF THE COLLEGE LISTED ABOVE. DO NOT SEND TO  
THE STUDENT.

This is to certify \_\_\_\_\_ has been a member of the

United Methodist Church for at least one year and is presently a member of \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name and mailing address of church \_\_\_\_\_

Annual conference \_\_\_\_\_

Does this student need financial assistance?	Yes ?	No ?	??
Are the parents able to assume full financial responsibility for the education of this person?	Yes ?	No ?	??
Has the applicant been active in the program of your church?	Yes ?	No ?	??
Does this individual have leadership ability?	Yes ?	No ?	??
Is the applicant interested in being of professional service to the church?	Yes ?	No ?	??
Do you know of any reason why this person should not be awarded a United Methodist Scholarship? (If yes, explain)	Yes ?	No ?	??
Did (or will) your church observe United Methodist Student Day this year?	Yes ?	No ?	??

(over)

**If this is a student you would really like the church to help, please give additional information that would guide the awards committee in determining the financial need of the applicant and whether the student is one who will help undergird The United Methodist Church now and in the future.**

**Return this form immediately to the United Methodist Scholarship Representative of the college listed on the front of this form.**