KAVANAUGH UNITED METHODIST CHURCH NURSING SCHOLARSHIP APPLICATION

DUE DATE: TUESDAY, APRIL 22, 2016 - BEFORE 3:00p.m.

Kavanaugh United Methodist Church offers a scholarship for a single parent who is a resident of Hunt County and is pursuing education for a career in nursing. Financial need is a prime consideration for this scholarship in addition to academic achievement, community involvement and honors you have been awarded.

Instructions

 Applicant should complete Parts I and II (application form and essay) and return to:

> Scholarship Committee Kavanaugh United Methodist Church 2516 Park Street Greenville, Texas, 75401

- Applicant should present Part III of this form to a biology instructor or nursing
 instructor if applicant is already enrolled in a nursing program. Please
 include a stamped envelope addressed to the committee above for this letter of
 recommendation. Be sure that your name is added on the line provided on this
 form.
- 3. Applicant should present Part IV of this form to another adult outside of the applicant's family who can provide a recommendation to the Scholarship Committee. Please include a stamped envelope addressed to the committee. Have the person completing the form to return it directly to the church address above by the due date. Be sure that your name is added on the line provided on Part II.
- 4. Please initial each page of Parts I and II in case the application pages get separated.

Kavanaugh United Methodist Church Nursing Scholarship Application Part I

1	Nama	A			
	Name				
2.	High School	Graduation Date			
3.	Address				
	Number Street	Apt. #			
	City Zip Code	PhonePhone			
	Email address	Cell Phone			
1.	Marital StatusSingleDivorced _	SeparatedWidowed			
5.	Names and ages of children				
ó.	Income (all sources) \$0-\$29.000 \$30,000-\$45,000 \$46,000-\$60,000 \$\$61,000-\$75,000 \$76,000-\$90,000 \$90,000 +				
	Number of dependent children in family attending college/university or vocational school as of next September, including you.				
7.	Employment including approximate number of hours per week. Please include months and years worked.				
	Dates Place of Emplo	yment Hours/Week			

List schools you are considering attending: School	Applied	Accepted
Have you received other scholarships and/or grants? O. If yes, please indicate name and amount.	YES	NO
Scholarship/Grant	Λι	nount
List of Activities: Include a list of your activities from	school church	and
List of Activities: Include a list of your activities from community including offices held, awards or honors recommunity.	school, church ceived.	and
I. List of Activities: Include a list of your activities from community including offices held, awards or honors recommunity including offices held.	school, church ceived.	and

Nursing Scholarship Application

2010

Initials

Part II

Please attach an essay about yourself and your career plans. Tell why you would like to be considered for this scholarship, including why your current financial status should qualify you to be a recipient.							
The attached essay is true and corre	ect.						
If chosen as a scholarship recipient, I understand that I must maintain enrollment in 9 semester hours and meet the scholastic requirements of the scholarship.							
Student Signature:							
		Ä.					
Nursing Scholarship Application	3 of 3	Initials					

Kavanaugh United Methodist Church Nursing Scholarship Application

Part III

Due Date:
TUESDAY, APRIL 22, 2016
BY: 3:00p.m.

To be completed by a *Biology Instructor or Nursing Instructor if applicant is already enrolled in a nursing program* and returned directly to:

Scholarship Selection Committee Kavanaugh United Methodist Church 2516 Park Street Greenville, Texas 75401

The student listed below is applying for a scholarship offered by Kavanaugh United Methodist Church. Financial need, scholastic achievement and character are to be considered when awarding this scholarship. Please provide a letter or recommendation that addresses these areas. All information provided will be kept confidential by the selection committee and will be disposed of after the selection is made.

All recommendations must be received by April 22, 2016 for the student to be considered for a scholarship. We appreciate your cooperation.

STUDENT NAME:

Kavanaugh United Methodist Church Nursing Scholarship Application

Part IV

Due Date: Tuesday, April 22, 2016 Before 3:00 p.m.

To be completed by a Personal Reference and returned directly to:

Scholarship Selection Committee Kavanaugh United Methodist Church 2516 Park Street Greenville, Texas 75401

The student listed below is applying for a scholarship offered by Kavanaugh United Methodist Church. Financial need, scholarship achievement and character are to be considered when awarding this scholarship. Please provide a letter of recommendation that addresses these areas. All information provided will be kept confidential by the selection committee and will be disposed of after the selection is made.

All recommendations must be received by April 22, 2016 for the student to be considered for a scholarship. We appreciate your cooperation.

STUDENT NAME: