

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.

Please send the requested information **no later than May 15** 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)