THE MANDEVILLE SCHOLARSHIP FUND APPLICATION

Applicant's Name (Please Print)	:

This Scholarship Fund was created through a gift from Doris and Arthur Mandeville to the Epworth United Methodist Church of Palmyra, New Jersey. It is administered by the Epworth Mandeville Scholarship Committee.

GUIDELINES

- 1) Awards are available for both full-time and permanent part-time graduate students, as defined by the respective university, who are members of the United Methodist Church in New Jersey preparing for ordained ministry or Christian Education
- 2) While awards are to be based upon financial need, such factors as academic scholarship, church involvement, and community involvement will also be considered in the evaluation process.
- 3) An applicant must be nominated by his or her local church and endorsed by the cognizant pastor. If the applicant is a pastor, then the nomination must be endorsed by the District Superintendent.
- 4) Awards shall be based upon the academic year.
- 5) Awards are to be made to a student as a part of that student's contribution to the cost of education. Every effort will be made to ensure that the award payment does not displace any other financial support to which the student may be entitled. Note: Part-time students will normally not receive the same amount as full-time students.
- 6) Scholarships are at the discretion of Epworth Mandeville Scholarship Committee. They are awarded for one year only, but may be re-awarded in subsequent years. Multiple awards may be granted in any given year.
- 7) Epworth Mandeville Scholarship Committee will not award scholarships to applicants who are not qualified, and reserves the right not to award a scholarship in a given year. Each check is issued jointly to the student and to the respective college/university.
- 8) All applicants should only fill out this form to be considered for this scholarship. **Substitute forms are** <u>not </u>permitted, except for the **financial statement spreadsheet.**

Nomination/Recommendation:		
Pastor or District Superintendent	Name (please print)	(Date)

Please type or print clearly. Use continuation pages whenever space on this form is inadequate.
Applicant Name:
Street:
City, State, Zip:
Phone # & Email address:
Last 4 digits of SS #:
Marital Status: Single Married No. of Dependents, if any
Education Information
School you will attend Fall Semester 2024 :
Your class year this Fall:
You will be living: On Campus With Parents Independently
Your degree program/major is:
If attending Seminary, please provide the start date:
Your grade point average: Last Semester Cumulative
Your career goal after graduation is: (Information on where you plan to serve afterwards would also be helpful)

Colleges and Universities:	
Transcripts attach	ed?Ye
Transcripts attach	ed?Ye
Transcripts attach	ed?Ye
Note: Students may submit non-official transcripts (to avoid time delays) with the but official transcripts from the university still must be submitted under separate	• •
High School:	
Church Information	
How long have you been a member of the United Methodist Church?What is your local church/municipality?	
Activities	
Identify any school, church, or community activities in which you have activel and/or lead:	y participated
Identify any special recognition/ awards/ honors you have received:	

Your current	employme	nt status is:					
Full	Time	Part Time	(# hours/we	ek) Not	: Employed ₋		
knowledge,	complete	•	tion provided in and I underst onsideration.			•	-
	Applicant	c's Signature				Date	
		***	IMPORTANT*	***			
INS	STRUCTIONS	3 & CHECKLIST 1	TO COMPLETE TH	IS APPLICA	ΓΙΟΝ, <u>YOU M</u>	IUST:	
and estimated educational e	d annual ex expenses. P	penses should lease be specifi	nd expenses is re be provided on ic about your fina provided a works	a separate ancial need	sheet includ s. We recon our use if yo	ding anticipat nmend that y	ted you
•			holarship in a p ehold income &	=	ar, be sure	to include t	:his
				N/A,	If yes, Atta	iched?Y	ΈS
		f your most rec 30, to Epworth	cent available gra a.	ades with y	our applicat	ion which m	ust
• •	-		mitted with this Inder separate co		•	ne), but offi	cial
					Atto	ached?\	YES
4) Submit thi Mail to: Email to:	Epworth Attention: I	United Method	Committee, 501 Mc	•	ŕ		

APPLICATION DEADLINE IS April 30th, 2024

$\textbf{``SUGGESTED''} \ \textbf{BUDGET} \ \textbf{SPREADSHEET} \ \textbf{-} \ \textbf{NOTE:} \ \textbf{Submit this worksheet} \ \underline{\textbf{or}} \ \textbf{your own version}$

CATEGORY	MONTHLY BUDGET	MONTHLY ACTUAL	SEMESTER BUDGET	SEMESTER ACTUAL	SCHOOL YR BUDGET	SCHOOL YR ACTUAL
LIST INCOME (such as):						
Jobs/Employment (W2)						
Student Loans						
Scholarships						
Financial Aid						
Miscellaneous						
• Other						
INCOME SUBTOTAL						
EXPENSES (such as):						
Rent or Room & Board						
Utilities						
Tuition/Fees						
Food/Groceries						
Car Loan/Transportation						
Insurance						
Gasoline/Oil						
Car Maintenance						
Entertainment						
Books/Supplies						
• Phone						
Computer/Internet						
Miscellaneous Expense						
EXPENSES SUBTOTAL						
NET INCOME (INCOME LESS EXPENSES)						