

CENTRAL OHIO EMMAUS COMMUNITY

SCHOLARSHIP APPLICATION FORM

Who Is Eligible? - Any graduating high school student whose parent, guardian or relative has attended an Emmaus Walk. Please list the person or persons who have attended. _____

Name (student applying) _____ Age _____

Address (street) _____

City _____ ZIP _____

Phone _____ Email _____

Parents or Guardians _____

Address (if different) _____

I will graduate from _____ on _____

For my application to be considered, my list of references and Part 2 of this application form are to be submitted with this application.

1. What college, university or higher education institution do you plan to attend? _____
2. In what field do you plan to study? _____
3. List three references, one must be either your counselor, teacher or high school principal.

Name: _____

Address: _____

Occupation: _____

Name: _____

Address: _____

Occupation: _____

Name: _____

Address: _____

Occupation: _____

Scholarship Application Part 2

Selection will be determined by a committee using the following criteria.

1. List all school activities/awards/recognition/leadership.

2. Non-school activities/awards/recognition/leadership.

3. Grade point average for last seven semesters. _____

4. Work experience.

5. Please attach a short essay (200 words) regarding your financial needs and career and educational goals.

Application must be returned by April 1 to be considered for this scholarship. If you have questions or need additional information, please feel free to contact:

jgjsweets@aol.com

Send completed application to:

First United Methodist Church

207 S. Court St.

Marysville, Ohio 43040

Attention: Emmaus Scholarship

Applicant signature _____

Date _____