



**ROBERT FREELAND CAMPBELL AND INEZ C. CAMPBELL
COLLEGE SCHOLARSHIP FUND**

and/or

**JOHN PAUL MCGREW AND CARRIE E MCGREW
COLLEGE SCHOLARSHIP FUND**

ELIGIBILITY:

Any high school graduate of Linn County, Kansas.

INFORMATION:

Recipients shall be selected on the basis of financial need, scholarship, and participation in church, community, and school activities. Average passing grades are required for each semester in order to receive the additional installment of the scholarship. If for any reason the student should not qualify for the second, third, or fourth installment, another qualified recipient will be chosen immediately to receive the remaining installments of these two-year scholarship. These two-year scholarships are based on the interest accrued from individual trusts, and will vary from several hundred to several thousand dollars based on the respective scholarship and on current interest rates.

The funds will be distributed at the beginning of each semester for four (4) semesters. The money may be used for books, tuition, and other necessities for college, university, or any accredited community college or trade school.

The decision of the governing body (of the United Methodist Church in Mound City) shall be final. Please note that students of the United Methodist Church in Mound City receive a slight advantage in the scoring process, but many students who are either active in other churches or who do not attend church have received the scholarship in the past.

PROCEDURE FOR APPLYING:

1. Obtain application form.
2. You (the student) are responsible for furnishing an official transcript of your high school credits, your ACT scores, and your GPA.
3. Identify two references and give each a copy of the reference form provided. One of the references must be a faculty member of your current high school and one must be from the community in which you belong. Relatives are not eligible to be a reference. Please have each reference return the form to you in a sealed envelope which you must include it in your application packet.
4. Please feel free to use additional pages as necessary to provide a complete application.
5. Return the completed packet to your school guidance counselor by April 1. *Please note: no application will be considered if any of the information is incomplete.*
6. If you are chosen as a recipient of a scholarship, we would like you to be present during our Sunday worship on the 1st Sunday in June so we may recognize you.



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| SCHOLARSHIP APPLICATION | | |
|---|-------------------------------|---------------------------------|
| APPLICANT INFORMATION | | |
| Name: | Male <input type="checkbox"/> | Female <input type="checkbox"/> |
| Date of birth: | Place of Birth: | Phone: |
| Current address: | | |
| City: | State: | ZIP Code: |
| PARENT(S) AND/OR LEGAL GUARDIAN | | |
| Name: | | |
| Address: | | Phone: |
| City: | State: | ZIP Code: |
| Relationship: | | |
| Name: | | |
| Address: | | Phone: |
| City: | State: | ZIP Code: |
| Relationship: | | |
| HIGH SCHOOL EDUCATION | | |
| Current School: | | |
| City: | State: | Years Attended: |
| Previous School: | | |
| City: | State: | Years Attended: |
| Previous School: | | |
| City: | State: | Years Attended: |
| REFERENCES | | |
| High School Faculty Member Name: | | Phone: |
| Address: | | |
| City: | State: | ZIP Code: |
| Community Member Name: | | Phone: |
| Address: | | |
| City: | State: | ZIP Code: |
| SIGNATURE | | |
| I authorize the verification of the information provided on this application. | | |
| Signature of applicant: | | Date: |

In what extra-curricular community and school activities have you participated and for how many years? (Please list any offices held.)

In what church related activities have you participated and where? (Such as church attendance, Sunday School, youth groups, camps, etc.)

What honors or awards have you received?

Briefly describe your hobbies.

Have you been employed during the summer and/or during the school year while in high school? If so, please fill out the following:

| EMPLOYMENT RECORD | | | | |
|-------------------|-----|---------------------|-------------|-----------|
| Company: | | | Phone: | |
| Address: | | City: | State: | ZIP Code: |
| Job Title: | | Hourly Rate: | Supervisor: | |
| Responsibilities: | | | | |
| From: | To: | Reason for Leaving: | | |
| Company: | | | Phone: | |
| Address: | | City: | State: | ZIP Code: |
| Job Title: | | Hourly Rate: | Supervisor: | |
| Responsibilities: | | | | |
| From: | To: | Reason for Leaving: | | |

Which of the following represents the income of your parent or guardian?

| | |
|----------------------------|------------------------------|
| \$0.00 to \$20,000.00 | \$80,001.00 to \$100,000.00 |
| \$20,001.00 to \$40,000.00 | \$100,001.00 to \$120,000.00 |
| \$40,001.00 to \$60,000.00 | \$120,001.00 to \$140,000.00 |
| \$60,000.00 to \$80,000.00 | \$140,001.00 and above |

How many siblings do you have who are either living at home or attending college? _____

Do you have a college savings or a 529 Plan? Yes No If yes, please list the amount. _____

How are your parent(s) or legal guardian planning on supporting your higher education?

Are there any unusual financial circumstances of which you wish the selection committee to be aware?

What course of study do you plan to pursue?

Why do you want a higher education? Please give a complete answer below.



REFERENCE FORM FOR THE MOUND CITY UNITED METHODIST CHURCH

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Thank you for agreeing to be a reference for this applicant. We understand this can be a time-consuming task and we have tried to make it as easy as possible by providing the following check list. However, we suggest that a mere checking of the traits and qualities as listed does not constitute an adequate report of the candidate. Please use the comments space for additional observations. These observations can relate to the qualifications of the applicant as well as any financial concerns of which you have knowledge and you wish us to be aware. The information provided will be strictly confidential.

Name of Candidate: _____ Date: _____

| | Excellent | Good | Average | Below Average | Poor |
|-----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Ability to Express Thoughts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Adaptability to New Ideas | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attitude toward Work | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Capacity for Growth | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Church Participation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cooperation and Loyalty | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enthusiasm | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Good "Common Sense" | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Health | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Personal Appearance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Scholarship Ability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Social Qualities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

Signature: _____ Official Position: _____

Printed Name: _____ City and State: _____