

**THE REV. NEIL AND IMOGENE YONGUE SCHOLARSHIP PROGRAM FUND**

**St. Andrew By-The-Sea UMC**

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Application for \_\_\_\_\_ academic year

**PERSONAL DATA**

NAME

\_\_\_\_\_

Last First Middle

MAILING ADDRESS \_\_\_\_\_

Street Address or Post Office Box

\_\_\_\_\_

City County State Zip Code

HOME PHONE \_\_\_\_\_ MOBILE \_\_\_\_\_

EMAIL \_\_\_\_\_

PRESENT CHURCH MEMBERSHIP

CHURCH NAME \_\_\_\_\_

CITY AND STATE \_\_\_\_\_

MEMBER SINCE \_\_\_\_\_

PRIOR CHURCH MEMBERSHIP \_\_\_\_\_

MARITAL STATUS  SINGLE  MARRIED

NAME OF SPOUSE \_\_\_\_\_

NUMBER OF CHILDREN \_\_\_\_\_ AGES \_\_\_\_\_

**EDUCATION**

HIGH SCHOOL \_\_\_\_\_

HIGH SCHOOL CITY AND STATE \_\_\_\_\_

DATE OF GRADUATION \_\_\_\_\_

COLLEGE/UNIVERSITY (ATTENDING/ APPLIED TO) \_\_\_\_\_

DATES OF ATTENDANCE \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

SCHOOL TELEPHONE \_\_\_\_\_

FIELD OF STUDY \_\_\_\_\_

GRADE POINT AVERAGE (ATTACH COPY OF OFFICIAL TRANSCRIPT) \_\_\_\_\_

STUDENT ID NUMBER \_\_\_\_\_ (IMPORTANT TO ASSURE PROPER SCHOLARSHIP CREDIT)

# THE REV. NEIL AND IMOGENE YONGUE SCHOLARSHIP PROGRAM FUND

## CLASS STANDING

- ENTERING FIRST YEAR
- SOPHOMORE
- JUNIOR
- SENIOR

## ENROLLMENT STATUS

- PART-TIME
- FULL-TIME

## GRADUATE SCHOOL

- FIRST YEAR
- SECOND YEAR

INDICATE THE SEMESTER(S) YOU NEED ASSISTANCE \_\_\_\_\_

EMPLOYMENT STATUS  PART TIME  FULL-TIME

PARENT/GUARDIAN \_\_\_\_\_

FATHER'S OCCUPATION \_\_\_\_\_

MOTHER'S OCCUPATION \_\_\_\_\_

NUMBER OF SIBLINGS \_\_\_\_\_ HOW MANY IN COLLEGE? \_\_\_\_\_ HOW MANY SELF-SUPPORTING? \_\_\_\_\_

## ESTIMATE OF EXPENSES FOR COMING YEAR

TUITION	_____	SOURCE OF FUNDS	
HOUSING	_____	AMOUNT YOU WILL RECEIVE FROM FAMILY/RELATIVES	_____
FOOD	_____	AMOUNT FROM PART-TIME EMPLOYMENT	_____
TRANSPORTATION	_____	POTENTIAL SUMMER EARNINGS	_____
MISCELLANEOUS	_____		

ANSWER THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED

WHY DID YOU SELECT YOUR COLLEGE MAJOR OR CURRICULUM PROGRAM?

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WHAT ARE YOUR CAREER GOALS?

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# THE REV. NEIL AND IMOGENE YONGUE SCHOLARSHIP PROGRAM FUND

LIST AN AWARDS, ACHIEVEMENTS, AND/OR HONORS YOU HAVE RECEIVED AND EXTRA-CURRICULAR ACTIVITIES IN WHICH YOU HAVE PARTICIPATED.

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LIST ANY OTHER GRANTS, SCHOLARSHIP AND LOANS APPLIED FOR/RECEIVED.

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SPECIFY ANY FINANCIAL CIRCUMSTANCE THAT YOU MAY HAVE WHICH WOULD ASSIST THE SCHOLARSHIP COMMITTEE IN DETERMINING YOUR FINANCIAL NEED.

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PLEASE CHECK ONE  
FAMILY INCOME

- UNDER \$30,000     \$30,000-\$60,000     \$60,000-\$90,000     \$90,000 + ABOVE



United Methodist Church

**Hilton Head Campus**  
20 Pope Avenue  
Hilton Head, SC 29928  
843.785.4711

**Bluffton Ministry Center**  
39 Persimmon St. #203  
Bluffton, SC 29910  
843.837.4712