

ENDOWMENT COMMITTEE
GRACE UNITED METHODIST CHURCH
1120 17th Street South Moorhead, MN 56560

2017 OFFUTT SCHOLARSHIP APPLICATION

NAME _____ M F

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ SSN _____

PARENT(S) / GUARDIAN(S) _____

HIGH SCHOOL _____ YEAR GRADUATED _____

School you plan to attend _____

SCHOOL ACTIVITIES (include years of involvement and offices held):

CIVIC AND CHURCH ACTIVITIES (years and offices held):

WORK HISTORY (please list employers, years worked, and average number of hours worked per week):

Offutt Scholarships you have received in preceding years:

On a separate sheet of paper, please submit a statement of your educational and career goals.

I understand that 50% (Fifty percent) of this scholarship is a gift. The other 50% is a no interest loan that is to be repaid to the Endowment Fund in annual payments beginning one year after graduation or completion of your studies.

SIGNATURE OF APPLICANT

DATE