



# VANCOUVER METHODIST FOUNDATION

401 East 33<sup>rd</sup> Street  
Vancouver, Washington 98663

## APPLICATION FOR CLARK COUNTY HIGH SCHOOL GRADUATES SCHOLARSHIP

1. Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_  
Last First Middle

2. Address \_\_\_\_\_  
Street City State Zip

3. Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Date of Application \_\_\_\_\_

4. Email address: \_\_\_\_\_

5. High school you are attending: \_\_\_\_\_

6. College or university you plan to attend: \_\_\_\_\_

Second choice: \_\_\_\_\_

Have you applied? \_\_\_\_\_ Been accepted? \_\_\_\_\_

Degree/Major you plan to pursue: \_\_\_\_\_

7. Scholarships, Grants, or Loans you have applied for:	Amount	Pending	Awarded (Y/N)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. How many credit hours per term do you plan to take? \_\_\_\_\_

9. Please include the following items when you email this application:

*(Send all via email to [vanmethodistfoundation@gmail.com](mailto:vanmethodistfoundation@gmail.com))*

A. A transcript of your high school record. *(May be scanned copy)*

B. An essay describing one school, and one non-school activity or accomplishment that has been most important to your growth, academically or otherwise. *(Attach as separate document)*

C. Your personal resume.

D. Three letters of reference from people other than family members. If there is a church affiliation, one of these recommendations should be from your youth director or pastor. *(These may be scanned copies or you may ask that those who write your references send them directly to email address above)*

**ANTICIPATED EXPENSES FOR FIRST SCHOOL YEAR**

- 1. Rent or mortgage payment \$ \_\_\_\_\_
- 2. Food and household expenses \$ \_\_\_\_\_
- 3. Tuition and fees \$ \_\_\_\_\_
- 4. Books \$ \_\_\_\_\_
- 5. Car or other time payments \$ \_\_\_\_\_
- 6. Recreation \$ \_\_\_\_\_
- 7. Personal (clothes, etc.) \$ \_\_\_\_\_
- 8. Other \_\_\_\_\_ \$ \_\_\_\_\_
- 9. Total Expenses (sum of lines 1-8) = \$ \_\_\_\_\_

**ANTICIPATED FUNDS AVAILABLE FOR FIRST SCHOOL YEAR**

- 10. Work of applicant \$ \_\_\_\_\_
- 11. Financial support from parents or spouse \$ \_\_\_\_\_
- 12. Social Security/Federal Assistance \$ \_\_\_\_\_
- 13. Scholarships awarded \$ \_\_\_\_\_
- 14. Savings \$ \_\_\_\_\_
- 15. Loans \$ \_\_\_\_\_
- 16. Other \_\_\_\_\_ \$ \_\_\_\_\_
- 17. Total Financial Support (sum of lines 10-16) = \$ \_\_\_\_\_

How much additional financial aid is needed? (subtract line 17 from line 9; if line 17 is greater than line 9, enter 0) \$ \_\_\_\_\_

Explain briefly any pertinent circumstances that pertain to your financial need:

**THIS APPLICATION MUST BE SUBMITTED NO LATER THAN APRIL 1.**

*Please submit your application, essay, personal resume, scanned transcript and scanned letters of recommendation to:  
[vanmethodistfoundation@gmail.com](mailto:vanmethodistfoundation@gmail.com)*