APPLICATION for 2020-2021

***Julian E. Johnston College Scholarship***

United Methodist Church of Mount Vernon

*Please type or print*

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Names of Parents \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your College or University \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year classification (junior or senior) as of September 2020 \_\_\_\_\_\_\_\_\_\_\_\_\_

1. On a separate page, tell us: 1) your goals for the future; 2) why you might have special financial needs; 3) the reasons this scholarship would be helpful for you. Please limit your comments to one page.



**Submit: 1) this filled-out application form; 2) the one-page description of your goals and needs as described above; and 3) one letter of recommendation (e.g. teacher, employer, college staff member) by Friday, June 5, 2020 to**

Attention: Scholarship Committee

United Methodist Church

304 1st St SW

Mount Vernon, IA 52314-1701

If you have questions:

Church Phone: 319-895-6286

Church e-mail: alisondix@umcmv.com