Tommy & Maude Carter Scholarship Application First United Methodist Church

First United Methodist Church 601 North Pink Street Cherryville, North Carolina 28021

2022-2023 academic year

Name:			
Last	First	Middle Initial	Social Security Number
Address:			
Address: Street Address	or Post Office Box		
City	County	State	Zip Code
Telephone: Home:		Cell:	
Email:			
Parent/Guardian/Next of Kin			
	Name	Address	
	Talambana	#	
Present Church Membership:	Telephone	#	
City and State:			
Member since:			
Prior church members	ship:		
Marital Status: Single:		Married:	
Name of Spouse:			
Children: Number	Age	es:	
TT: 1 C 1 1			
High School			
High School city and state Date of Graduation			
	Gre	ada maint arranga	
Class standing (Attach copy of official tran		ade point average	
(Attach copy of official trans	iscript.)		
College/University (attending	y/applied to)		
Dates of attendance:	, appired to)		
School Address			
School Telephone #			
Field of Study			
Grade point average: (attach	copy of official tra	anscript)	
Class Standing: Enrollment s		Check One:	
Entering First year		Part-time	
Canhamana		Full-time	
Junior			
Graduate School: First Year	Sec	cond year	

Date this Recommendation is Due to be Returned to the Church Secretary is **April 25, 2023.**

Carter Scholarship Personal Recommendation Form

Applicant's Name
Name of Person Evaluating the Applicant
Length of Time Evaluator has known the Applicant
Capacity in Which Evaluator Knows the Applicant / Nature of the Relationship between Evaluator and Applicant
Each applicant of the Carter Scholarship is required to ask a member of the church family or church staff to evaluate the applicant. According to the rules of the Carter Scholarship, "those applicants whose records demonstrate a commitment to the spiritual life and charitable life of her/his community shall be given strong consideration in the evaluation process to determine the recipient of the Carter Scholarship." Please cite below how this applicant has demonstrated this commitment.
After you have evaluated the applicant, please sign, date and return this form to the church secretary.
Evaluation of Applicant: