



# First United Methodist Church of Cheraw Consolidated Scholarship Application 2025



First United Methodist Church of Cheraw annually awards eight scholarships to **current high school seniors accepted by and planning to attend an accredited two or four-year school**. Submitting this completed application will enable you to be considered for all of the scholarships for which you are eligible based upon the criteria established for each. Applications will be received through April 15<sup>th</sup>.

<b>I. Personal Information</b>				
Last Name	First	Middle	High School Now Attending	
Mailing Address		City	State	Zip Code
Email Address			Home Phone Number	
Intended Major and Career Path (For example: Biology major and medical field; Education major and high school teacher; science major and nursing career)				

<b>II. Required Documentation and Submissions</b>
Forward the first three items below to the Memorials and Scholarship Committee, First United Methodist Church, 117 Third Street, Cheraw SC 29520 by April 15. Provide a school official and a community member with a recommendation form so that they might complete and mail them directly to the address above.
<ul style="list-style-type: none"> <li><input type="checkbox"/> An 'official copy' of your high school transcript forwarded by you or your guidance counselor to the Memorial Committee</li> <li><input type="checkbox"/> This page with Sections I and III completed by the applicant</li> <li><input type="checkbox"/> A copy of your letter of acceptance to an accredited 2 or 4-year college, university or technical school</li> <li><input type="checkbox"/> Two letters of recommendation using the form provided: one from a school teacher, guidance counselor or administrator and a second from an employer, pastor or community member. These will be mailed by the individual completing the form directly to the Memorial Committee.</li> </ul>

<b>III. Activities and Recognition</b>
In the space below indicate any school, community or extracurricular activities in which you participate and note any honors, awards or other recognition that you may have received. Attach sheets if necessary.



# First United Methodist Church of Cheraw Consolidated Scholarship Application



## Recommendation of School Official

**Return By April 15<sup>th</sup> to:**  
**Memorials & Scholarship Committee**  
**First United Methodist Church**  
**117 Third Street**  
**Cheraw SC 29520**

**Applicant's Name:**

The student named above is making application for a scholarship provided by First United Methodist Church of Cheraw SC. Each applicant is asked to provide a recommendation from a school official (teacher, guidance counselor or administrator) and a community member. Please provide a candid assessment regarding this student's personal and academic qualifications as well as the qualities you have observed that might make them successful in their future educational pursuits. Your assessment will remain confidential. Please return your recommendation to the Scholarship Committee at the address above by April 15<sup>th</sup> for inclusion in the applicant's file.

	ASSESSMENT					
	Exem- plary	Very Good	Good	Fair	Poor	Not Observed
<b>Intellectual Capacity:</b> Ability to ingest, integrate and work with information						
<b>Maturity:</b> Personal development and the ability to cope with life situations						
<b>Judgment:</b> Ability to effectively evaluate a problem						
<b>Resourcefulness:</b> Ability to discover and manage resources						
<b>Leadership:</b> Ability to initiate, lead and supervise others						
<b>Integrity:</b> Demonstrates honesty, trustworthiness and uprightness						
<b>Creativity:</b> Ability to generate novel ideas and approaches to problems						

<b>Overall Recommendation: (Check one)</b>	This applicant receives my highest recommendation without reservation	I recommend this applicant with confidence	I recommend this applicant	I would not recommend this applicant
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**Other Comments (optional):**

\_\_\_\_\_  
School Official's Signature

\_\_\_\_\_  
Title/Position

\_\_\_\_\_  
Date



# First United Methodist Church of Cheraw Consolidated Scholarship Application



## Recommendation of Community Member

Return By April 15<sup>th</sup> to:

**Memorials & Scholarship Committee**  
**First United Methodist Church**  
 117 Third Street  
 Cheraw SC 29520

**Applicant's Name:**

The student named above is making application for a scholarship provided by First United Methodist Church of Cheraw SC. Each applicant is asked to provide a recommendation from a school official (teacher, guidance counselor or administrator) and a community member. Please provide a candid assessment regarding this student's personal and academic qualifications as well as the qualities you have observed that might make them successful in their future educational pursuits. Your assessment will remain confidential. Please return your recommendation to the Scholarship Committee at the address above by April 15<sup>th</sup> for inclusion in the applicant's file.

	ASSESSMENT					
	Exem- plary	Very Good	Good	Fair	Poor	Not Observed
<b>Intellectual Capacity:</b> Ability to ingest, integrate and work with information						
<b>Maturity:</b> Personal development and the ability to cope with life situations						
<b>Judgment:</b> Ability to effectively evaluate a problem						
<b>Resourcefulness:</b> Ability to discover and manage resources						
<b>Leadership:</b> Ability to initiate, lead and supervise others						
<b>Integrity:</b> Demonstrates honesty, trustworthiness and uprightness						
<b>Creativity:</b> Ability to generate novel ideas and approaches to problems						

<b>Overall Recommendation:</b> (Check one)	This applicant receives my highest recommendation without reservation	I recommend this applicant with confidence	I recommend this applicant	I would not recommend this applicant
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**Other Comments (optional):**

\_\_\_\_\_  
Community Member's Signature

\_\_\_\_\_  
Title/Position/Relationship

\_\_\_\_\_  
Date