



2019-2020 SCHOLARSHIP APPLICATION

You will be considered for all scholarships if you complete all or a portion of this application and return it by March 1, 2019.

Please print or type:

Name: _____ Student ID: _____ Birth Date: _____
Last First

Email Address: _____

Some scholarships have specific criteria that must be met before an award can be made. To assist using determining your eligibility for these scholarships, please answer the questions listed below:

I plan to enroll in _____ number of hours in Fall '19 and _____ number of hours in Spring '20.
I plan to work _____ number of hours per week during the 2019-20 academic year.
Marital Status: Student - Single Married Separated Divorced Parent - Single Married Separated Divorced
If you have a physical disability, please specify what type: _____
Are either of your parents a graduate of FMU? ____ Yes ____ No
List your extracurricular activities/student organizations at FMU: _____
List your community service activities: _____
Are you planning to pursue a career in ministry? ____ Yes ____ No
Are you the first person in your family to go to college? ____ Yes ____ No
Are you a nursing major? ____ Yes ____ No
If you are an international student, list your country of residence: _____

Check the following if YOU have an affiliation with:

Church music program or Church/church activities: _____

Check the following if you, your spouse, or your parents are affiliated with any of the following organizations.

	Type of Affiliation (employee, member, etc.)	Relationship to Applicant (self, mother, spouse, etc.)
<input type="checkbox"/> ACS Technologies	_____	_____
<input type="checkbox"/> Assurant Specialty Property, Florence, SC	_____	_____
<input type="checkbox"/> Bénéteau	_____	_____
<input type="checkbox"/> Chase	_____	_____
<input type="checkbox"/> Duke Energy Progress	_____	_____
<input type="checkbox"/> Farmers Telephone Cooperative	_____	_____
<input type="checkbox"/> First Federal	_____	_____
<input type="checkbox"/> First Reliance	_____	_____
<input type="checkbox"/> Health Facilities Credit Union	_____	_____
<input type="checkbox"/> Home Builders Assn. of the Greater Pee Dee	_____	_____
<input type="checkbox"/> Honda	_____	_____
<input type="checkbox"/> IGA	_____	_____
<input type="checkbox"/> Marlboro Electric Cooperative	_____	_____
<input type="checkbox"/> McDonald's (owner's name: _____)	_____	_____
<input type="checkbox"/> Morning News	_____	_____
<input type="checkbox"/> Pee Dee Electric Cooperative - Additional Application Required	_____	_____
<input type="checkbox"/> Pee Dee Federal Credit Union	_____	_____
<input type="checkbox"/> Pepsi Cola of Florence, SC	_____	_____
<input type="checkbox"/> Presbyterian Church (name: _____)	_____	_____
<input type="checkbox"/> Realtor Assn. of the Greater Pee Dee	_____	_____
<input type="checkbox"/> St. Anne's Catholic Church	_____	_____
<input type="checkbox"/> St. Luke Lutheran Church, Florence, SC	_____	_____
<input type="checkbox"/> Sam Carbis Solutions Group	_____	_____
<input type="checkbox"/> Santee Electric Cooperative - Acct. # _____	_____	_____
<input type="checkbox"/> The Citizen's Bank	_____	_____
<input type="checkbox"/> West Florence Rural Volunteer Fire Dept.	_____	_____

I understand that; 1) submitting a scholarship application does not guarantee that I will receive a scholarship, 2) I have the right to skip any or all of the questions listed above and/or not complete a FAFSA, but it may affect consideration for certain scholarships, and 3) these scholarships are non-renewable.

Signature _____ Date _____