



WALLACE  
COMMUNITY  
COLLEGE

**MATTIE KOLB SCHOLARSHIP –**

**DOTHAN DISTRICT UNITED METHODIST WOMEN**

The Financial Aid Office has received information for the Mattie Kolb scholarship for Fall Semester 2013. This scholarship is awarded by the Dothan District United Methodist Women. The scholarship is awarded based on financial need, academic record, and service to church and community.

**This application, along with official transcripts, must be mailed to the following address no later than April 15, 2013.**

UMC District Office  
ATT: Mattie Kolb Scholarship  
256 Honeysuckle Road, Suite 4  
Dothan, AL 36305

Scholarship winners will receive notification no later than May 15, 2013.

**MATTIE KOLB  
SCHOLARSHIP APPLICATION**

**DIRECTIONS:** Complete the application form accurately and completely. Attach Additional sheets if needed. Put NA in any blank not applicable to you. Applications not filled out completely and applications postmarked after the due date (April 15, 2013) will not be considered.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Marital Statue: \_\_\_\_\_ Name of Spouse: \_\_\_\_\_

Number of children: \_\_\_\_\_ Ages of Children: \_\_\_\_\_

Parents' Name: \_\_\_\_\_

Parent's Address, if different from yours: \_\_\_\_\_ Tel: \_\_\_\_\_

Number of brothers and sisters living at home: \_\_\_\_\_

Number of other family members to be enrolled in college during the coming academic year and name of their school: \_\_\_\_\_

**FINANCIAL INFORMATION**

1. What is your family's gross income? Place a check in the appropriate blank.

\_\_\_\_ Under \$15,000    \_\_\_\_ \$15,000-30,000    \_\_\_\_ \$30,000-45,000    \_\_\_\_ \$45,000-60,000  
\_\_\_\_ \$60,000 -75,000    \_\_\_\_ \$75,000-90,000    \_\_\_\_ \$90,000-105,000    \_\_\_\_ Over \$105,000

2. What are your estimated college expenses for the coming year in specified categories?

\$ \_\_\_\_\_ Tuition and Fees  
\$ \_\_\_\_\_ Books  
\$ \_\_\_\_\_ Housing (Resident students only)  
\$ \_\_\_\_\_ Transportation (commuting students only)  
\$ \_\_\_\_\_ TOTAL

3. What income do you expect to earn yourself during the coming year?

\$ \_\_\_\_\_ Income for work during the academic year  
\$ \_\_\_\_\_ Income for work during summer or breaks

4. Have you received financial assistance for college expenses during the past year from any source other than your family? \_\_\_\_ Yes \_\_\_\_ No

5. Do you expect to receive financial assistance for college expenses during the coming year from any source other than your family? \_\_\_\_ Yes \_\_\_\_ No. If your answer is yes, Specify the source(s) and anticipated amount(s):  
Describe any extenuating financial circumstances of which you would like the scholarship committee to be aware:

## ACADEMIC INFORMATION

1. List the name and location of the college you plan to attend during the coming year and classification:  
( ) Freshman ( ) Sophomore ( ) Junior ( ) Senior (Specify \_\_\_\_\_ School)
2. Identify your major:
3. What will your enrollment status be during the coming year?  
( ) Full-time student ( ) Part-time student
4. What degree are you seeking?  
When do you expect to complete this degree?  
List all colleges you have attended, dates of attendance, and degrees earned (if any)

<u>College</u>	<u>Dates</u>	<u>Degrees</u>
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5. Give the name and location of high school(s) you attend(ed).

**Note:** For this application to be considered, official transcripts of all high school and college work must be sent to the address below. The transcripts must indicate your GPA.

## CHURCH AFFILIATION (IF ANY) & ACTIVITIES

## LIST SCHOOL/COLLEGE AND COMMUNITY ACTIVITIES AND HONORS

**MY SIGNATURE BELOW CERTIFIES THAT I HAVE ANSWERED ALL ITEMS ACCURATELY AND COMPLETELY TO THE BEST OF MY KNOWLEDGE AND ABILITY.**

SIGNATURE

DATE

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