### Mattie Kolb Scholarship Committee

Dothan District United Methodist Women C/O JOLINDA STRICKLAND 512 E CHURCH ST HEADLAND AL 36345-1814

January 31, 2020

To Whom It May Concern:

Enclosed is an application for the Mattie Kolb Scholarship which is a \$500 scholarship awarded yearly by the Dothan District United Methodist Women. Please make copies available to any student, male or female, you believe may be interested. The scholarship is awarded based on financial need, academic record, and service to church and community.

Please contact Jolinda Strickland at jolinda928@gmail.com if you have any questions.

Sincerely,

Mattie Kolb Scholarship Committee

## 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 April 15th will not be considered.

Name	:		Telephone:		
Addre	SS:				
	Street or P O Box	City	State	Zip Code	
Marital Status:		Name of Sp	ouse:		
Number of Children:		Ages of Child	Ages of Children:		
Paren	ts' Name:				
Paren	ts' Address (if different fr	om yours):			
Paren	ts' Telephone Number: _	Nu	Imber of brothers &	sisters living at home:	
		ers to be enrolled in colleg		academic year and name of	
FINAN	ICIAL INFORMATION				
1.	What is your family's gr	oss income? Place a checl	k in the appropriate b	blank.	
_		\$15,000-\$30,000 \$75,000-\$90,000			
2.	What are your estimate	d college expenses for the	e coming year in spec	cified categories?	
	\$ \$ \$ \$ \$	Tuition and Fees Books Housing (Resident stue Transportation (comm TOTAL	dents only) nuting students only)		
3.	\$	pect to earn yourself duri Income for work durin Income for work durin	ig the academic year		

4. Have you received financial assistance for college expenses during the past year from any source other than family? \_\_\_\_\_Yes \_\_\_\_No

5. Do you expect to receive financial assistance for college expenses during the coming year from any other source other than your family? \_\_\_\_Yes \_\_\_\_No. If your answer is yes, specify the source(s) and anticipated amount(s): \_\_\_\_\_

#### ACADEMIC INFORMATION

1. List the name and location of the college you plan to attend during the coming year and classification

School:					
Freshman	_SophomoreJuniorSenio	or			
Identify your major: _					
What will your enroll	What will your enrollment status be during the coming year?Full-TimePart-Time				
What degree are you	What degree are you seeking?				
When do you expect	When do you expect to complete this degree?				
	List all colleges you have attended, dates of attendance and degrees earned (if any)				
College	Dates	Degree			
	Dates				

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 & 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

This application and your official transcripts must be mailed to the following address no later than April 15<sup>th</sup>: MATTIE KOLB SCHOLARSHIP C/O JOLINDA STRICKLAND 512 E CHURCH ST HEADLAND AL 36345-1814

Note: Scholarship winners will receive notification no later than May 30<sup>th</sup>.