



# Lampasas Methodist CHURCH

2 Alexander Lane  
Lampasas, TX 76550

## ENDOWMENT FUND SCHOLARSHIP FORM

Please complete by typing or printing all information applicable to you except where the signature is required.  
Return to Lampasas Methodist Church office by April 1, 2024.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ LMC MEMBER \_\_\_\_\_

CURRENT HIGH SCHOOL \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ OCCUPATION \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ OCCUPATION \_\_\_\_\_

NUMBER OF FAMILY MEMBERS LIVING IN THE HOME INCLUDING YOURSELF \_\_\_\_\_

NUMBER OF FAMILY MEMBERS CURRENTLY ENROLLED IN COLLEGE \_\_\_\_\_

PARENT'S COMBINED YEARLY ADJUSTED GROSS INCOME \_\_\_\_\_

CUMULATIVE GPS \_\_\_\_\_ CLASS RANK \_\_\_\_\_ INTENDED MAJOR (if decided) \_\_\_\_\_

SCHOOL/COLLEGE PLANNING TO ATTEND \_\_\_\_\_

DESCRIBE BRIEFLY IN THE APPROPRIATE SPACES BELOW YOUR LEADERSHIP  
RESPONSIBILITIES, HONORS, WORK EXPERIENCE, AND ACTIVITIES. (ATTACH AN EXTRA SHEET IF NECESSARY.)

LEADERSHIP - Elected positions: Student Council, Class Officer, Clubs, Church, etc.

CLUB/ORGANIZATION/CHURCH/WORK EXPERIENCE/ COMMUNITY	YEARS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Since this scholarship is not specifically for academic ranking, please attach a one-page essay describing your interests, goals for the future, church/community involvement, and demonstration of character. A personal interview may be a part of the selection process. Thank you.