



THE OKLAHOMA UNITED METHODIST FOUNDATION
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 Administrative Assistant

**COHLMIA SCHOLARSHIP APPLICATION
 SUMMER COURSE OF STUDY**

APPLICANT NAME: _____
 ADDRESS: _____
 TELEPHONE: _____
 E-MAIL: _____

UNIVERSITY/COLLEGE: BURSAR, SUMMER COURSE OF STUDY
 PERKINS SCHOOL OF THEOLOGY
 SOUTHERN METHODIST UNIVERSITY
 DALLAS, TX 75275-0133

NOTE: THIS SCHOLARSHIP AWARD WILL BE SENT TO PERKINS FOR YOUR BENEFIT.

APPLICANT SSN: _____
 REGISTERING FOR: SESSION I SESSION II
 ___ 1 CLASS ___ 1 CLASS
 ___ 2 CLASSES ___ 2 CLASSES

TOTAL COST: \$ _____ (INCLUDING ROOM, BOARD, AND FEES)
 TUITION DEADLINE: _____

BRIEF STATEMENT OF GOALS:

OTHER SCHOLARSHIP ASSISTANCE:

SIGNATURE: _____ DATE: _____

D. S. APPROVAL: _____ DATE: _____

LOCAL PASTOR REGISTRAR: _____ DATE: _____

— APPLICATION DEADLINE APRIL 1 —

SCHOLARSHIP AWARDS ARE FOR TUITION AND/OR BOOKS AND ARE DIRECTED TO YOUR UNIVERSITY FOR YOUR BENEFIT. THE FOUNDATION MAY CONTACT YOUR UNIVERSITY AT ANY TIME TO VERIFY ENROLLMENT. IF YOU RECEIVE AN AWARD BUT YOUR PLANS CHANGE, PLEASE NOTIFY THE FOUNDATION AND YOUR UNIVERSITY AS SOON AS POSSIBLE. ALSO PLEASE KEEP THE FOUNDATION UPDATED IF YOUR CONTACT INFORMATION CHANGES.