

KEN DOUGHTY MEMORIAL SCHOLARSHIP  
Administered by  
BETHANY CHURCH OF WANCHESE MEN'S GROUP  
\$1,000.00 PER YEAR

RETURN TO METHODIST MEN PRESIDENT OF BETHANY CHURCH  
P. O. BOX 239 WANCHESE, NC 27981

All applications must be postmarked by April 15 to be considered!

The purpose of this scholarship is to assist financially a graduating senior who is an active participant in Bethany Church of Wanchese and has been accepted to a school of higher learning.

The criteria that will determine a recipient of this scholarship will included the following: Applicant's high school transcript, 3 form letters of recommendation from non-family members. One of these letters must be from the Pastor and one of them from a Bethany man sponsor. A list of your extracurricular activities and community involvement, financial need, moral and religious character and 1-page letter of future goals and vocational desires.

1. No one item on the list of criteria will outweigh the others. The desire of the selection committee is to choose a well-rounded person for the scholarship.
2. A school of higher learning may be a 4-year college or university, junior or community college, Bible college, music school, technical or business school.
3. All applicants will receive a letter stating the decision of the selection committee.
4. The recipient will be recognized on "Graduating Senior's Sunday".
5. The recipient will receive 2 payments of \$500.00 one for the first semester and one for the second semester. This is conditioned on the recipient being enrolled in school and maintaining at least a "C" GPA. Monies will go for the sole purpose of tuition, room and board, books, supplies, or school fees.

Attached, please find copies of documents that must be filled out and returned as required. Following is a checklist for your convenience.

CHECKLIST:

- A completed application by April 15
- An official High School transcript
- 3 form letters of recommendation from non-family members
- 1-page letter stating one's life goals and vocational dreams

APPLICATION

Applicant's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Date of Birth \_\_\_\_\_

Telephone #'s \_\_\_\_\_

Social Security # \_\_\_\_\_

Parent (s) or Guardians Names \_\_\_\_\_  
\_\_\_\_\_

Parent Telephone #'s \_\_\_\_\_  
\_\_\_\_\_

Applicant's Church Activities \_\_\_\_\_  
\_\_\_\_\_

Applicant's Community Activities \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's High School organizations and activities participated in and any honors,  
including athletics, during High School years.

\_\_\_\_\_  
\_\_\_\_\_

Applicant's College preference \_\_\_\_\_

Parent (s) or Guardians Income \_\_\_\_\_ (Optional)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent (s) or Guardians Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

SCHOLARSHIP APPLICATION  
RECOMMENDATION FORM

Applicant's Name \_\_\_\_\_

Your Name \_\_\_\_\_

How long have you known applicant? \_\_\_\_\_

In what capacity have you known applicant? \_\_\_\_\_

\_\_\_\_\_

Please describe the applicant in terms of personal traits and accomplishment, (character, citizenship, leadership, social maturity, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe any unusual circumstances, special background information which would be helpful to the scholarship committee.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The information on this form is confidential and should be returned to the student in a sealed envelope or sent by April 15 to the appropriate scholarship committee, as identified by the student.