

The Ray & Elinor Brunkow Scholarship Application

Date _____

Applicant Name _____ Phone _____

Address _____ Zip Code _____ Age _____

RCPUMC Member / Staff Referring This Applicant, if applicable

Name _____ Phone _____

Family Information

List members of family by name, relationship, occupation, and if relevant, present status in regard to school, age, etc. Include address and phone, if different from applicant.

School Information

High School Name _____

High School Address _____

Area of Concentration _____ Grade Average _____

When Do You Hope To Graduate? _____

Special Courses Taken _____

Activities, sports, offices, etc. _____

Advisors Name _____ Phone _____

Your Future

Please attach a cover letter explaining the challenges the applicant is trying to overcome in order to graduate from high school, how this scholarship assistance will help, the amount of financial assistance requested.

Please return this application to:

Rose City Park United Methodist Church
Memorial Scholarship Committee
5830 NE Alameda Portland, OR 97213

Church Phone: 503-281-1229
rev. 2006