



## Judith K. Burch Scholarship Application Form

(Please type or print)

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Social Security Number \_\_\_\_\_ Birth Date \_\_\_\_\_

Parent or legal guardian's name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

High School Name \_\_\_\_\_ Date of graduation \_\_\_\_\_

Cumulative Grade Point Average \_\_\_\_\_

Please list extra curricular activities in which you have participated during your Junior and Senior years in High School. (Or attach a resume.)

Please list any special honors you have received. (Or attach a resume.)

Please list any extenuating circumstances that might affect financial need that we should know about. (Medical bills, recent death in the family, etc.)

Applicant is aware that recipients must attend Bethany College  Yes  No

What is your intended or declared major at Bethany College? \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please attach an official copy of your transcript with this application.  
Please attach a written essay that states your reasons for attending Bethany College and lists your dreams for the future.