

**Application Form for  
Lois Pruett Williams University Child Development Educational Scholarship  
University United Methodist Church**

*Please complete the entire application and turn it into the church office.*

**PERSONAL INFORMATION**

Name: \_\_\_\_\_  
*First Middle Last*

Address: \_\_\_\_\_  
*Street City State Zip*

Phone: (\_\_\_\_) - \_\_\_\_\_ (\_\_\_\_) - \_\_\_\_\_  
*Home Cell*

Email: \_\_\_\_\_

**FAMILY INFORMATION**

Father's Occupation \_\_\_\_\_

Estimated Annual Income \$ \_\_\_\_\_

Mother's Occupation \_\_\_\_\_

Estimated Annual Income \$ \_\_\_\_\_

Number of Children in Family \_\_\_\_\_

Ages of Children \_\_\_\_\_

**CHURCH RELATIONSHIP**

Are you a member of University United Methodist Church?  Yes  No

By signing below, I certify that all information I have provided is accurate to the best of my knowledge. If granted an award, I also hereby authorize University United Methodist Church to release information pertaining to my award in church publications.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*