



Ocean View United Methodist Church
8400 E. Oak Island Dr.
Oak Island, NC 28465-8053
910-278-5973

February 2021

Subject: 2021 Marge Stuckey Scholarship

The Ocean View United Methodist Women are pleased to offer a \$1,000.00 Marge Stuckey Scholarship. This scholarship is awarded to a graduating High school senior who is a member of Ocean View UMC, or actively participates in the life of the church or has parents or grandparents associated with Ocean View UMC.

Qualifications to be eligible to apply for a scholarship are the following:

- Must be a 2021 High School graduate
- Must be a member of Ocean View or actively participates in the life of the church or has parents or grandparents associated with Ocean View UMC.
- Must be attending an accredited institution of higher learning after graduation

Each applicant will be required to write an essay as noted on the application. Applications are due by Monday May 7, 2021. Mail application to:

Ocean View United Methodist Women
Attn: Delaine Macdonald
Marge Stuckey Scholarship
8400 E. Oak Island Dr.
Oak Island, NC 28465-8053

or email application to oceanviewumw@gmail.com noting “Marge Stuckey Scholarship” in the subject line.

If you have any questions, contact Delaine Macdonald at oceanviewumw@gmail.com

Sincerely,

Delaine Macdonald, Vice President - Ocean View United Methodist Women
Chairman Scholarship Committee

Marge Stuckey Scholarship Application

Ocean View United Methodist Women
8400 E Oak Island Dr.
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Full Name _____ Birth Date _____

Address _____ Primary Phone # _____

City/State/Zip _____ Alternate Phone # _____

Parent Name(s) _____

Parent's occupation (father) _____ (mother) _____

Member of Ocean View Methodist ___ yes ___ no

If no, relative affiliated with Ocean View _____

Active in a faith-based group ___ yes ___ no

If "yes" describe involvement _____

Attach an essay on the subject of: ***During these unprecedented times of COVID-19 and civil unrest, how has my faith in God remained strong.***

Give a brief statement of the financial help your family will be able to provide; _____

Estimate of financial need: _____

Other Scholarships applied for: _____

Expected Course of Study _____ Where _____

Please attach a letter of acceptance from an accredited institution of higher learning.

I understand this personal information is given freely and will be kept confidential. The Review Committee may contact persons or organizations to verify information given.

Signature of applicant _____ Date _____