

St. Andrews Presbyterian Church Foundation
Beaumont, Texas

ATTN: Scholarship Committee

APPLICATION FOR DRENNAN SCHOLARSHIP

PLEASE PRINT...BLACK OR BLUE INK ONLY

DATE: _____

GENERAL INFORMATION

Name: _____ SSN or Student ID: _____

Address: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email address: _____ Date of Birth (MM/DD/YY): _____

Name of Parents/Guardian: _____

St. Andrews Presbyterian member? _____

EDUCATION INFORMATION

What school(s) have you previously attended and when was the last semester in which you were fully enrolled? _____

PLEASE ATTACH COPIES OF ALL TRANSCRIPTS

PLUS

Letter of Recommendation from a faculty member

WHY DO YOU THINK YOU SHOULD BE AWARDED THIS SCHOLARSHIP? (ATTACH

ADDITIONAL PAGE(S) IF NEEDED)_____

I hereby affirm that all of the above stated information is true and correct to the best of my knowledge. I also consent that my picture may be used for any purpose deemed necessary to promote the “Pappy” Drennan Scholarship Fund.

APPLICANT’S SIGNATURE: _____

PRINT PARENT/GUARDIAN NAME(S) if under 18: _____

PARENT/GUARDIAN SIGNATURE(S) if under 18: _____

Thank you for taking the time to complete this application.

We will be in touch with you shortly to inform you of your status.

Questions should be directed to Martha Pate
at mpate@gt.rr.com or (409) 866-5965.
Please include contact information with questions.