

**James Leon and Myrtice Marie K. Peed Award
Renewal Application Form**

Application Deadline: March 15th each year

Name of School _____

Social Security Number _____

Full Name _____

Permanent Address _____
Street City State Zip Code

Male () Female () Birthdate _____ Married () Single () Clergy Dependent? _____

E-mail address (please print): _____ Telephone #: () _____

Is student a US citizen or permanent resident? _____

If NO, of which country are they a citizen? _____ Permanent Alien Resident No. _____

Undergraduate ____ Masters Level ____ Male ____ Female ____ DOB _____ Phone No. _____

Occupation _____ U.S. Citizen (Yes/No) _____
If not, give permanent Alien Resident No.

Classification during scholarship year: () Freshman () Sophomore () Junior () Senior () Master Level

Hours required for full-time status at your school? _____ Enrolled full time? _____ GPA _____

If not enrolled full time, explain reason _____

Pursuing what degree? _____ Expected Graduation Date ____ Career Goal _____

Ethnic Group () African American () Asian () Caucasian () Hispanic
() Native American () Pacific Islander () Biracial () Other

Please indicate the ethnic community with which you most closely identify _____

Name/Address of the United Methodist Church where you are a member _____

Street City State Zip Code

Date of confirmation/membership vows with The United Methodist Church: ____/____/____
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Is your church located in the South Georgia Conference? _____

Are you still pursuing full-time ministry related to the South Georgia Conference? _____

What stage are you at in the candidacy process or what is your Conference relationship? _____

If you are still in candidacy, through what church or district board are you relating? _____

Are you currently under a student appointment? ____ If so, where? _____

If married, give name and occupation of Spouse _____

Number of Children _____ Name/Age _____

How much do you owe in education loans for previous years? _____

Will you be living on campus _____ with parents _____ in your own household _____ Other (explain) _____

What grants/scholarships will you receive or are still pending this year?

List names and amounts

List other grants/scholarships applied for, but not yet approved.

List names and amounts

Other Documents Required for Renewal Applicants

1. Request school registrar to mail an official transcript of your most recent academic work.

Please have documents sent to:

Peed Scholarship Committee
c/o Executive Director
P O Box 1529
Carrollton, GA 30112

Phone: 770.854.7283 e-mail: gahied@bellsouth.net

Applicant's Signature _____ Date _____

IMPORTANT!

You must reapply each year to receive this award. Re-application forms may be downloaded from:
<http://gahied.com/MethodistRelated.html>. *Application deadline is March 15th of each year.*

Only one major award from a United Methodist Church Agency may be received the same academic year

The above-named person is a student in good standing at this school and is being nominated for the PEED SCHOLARSHIP AWARD in the amount of \$ _____ for the academic year _____.

Signature of Scholarship Rep _____ Date _____

Name of Scholarship Rep: Cynthia H. Autry Position: Executive Director

Mailing Address P O Box 1529 Carrollton, GA 30112

Telephone Number 770.854.7283 E-Mail Address gahied@bellsouth.net