



BEACON MEMORIAL SCHOLARSHIP TRUST  
1115 S Boulder Avenue  
Tulsa, OK 74119

January 6, 2021

Dear Student,

The Beacon Memorial Scholarship Trust was established to assist graduating high school senior who wish to further their formal education but need financial help. ***This scholarship is available to graduating high school seniors and past Beacon Scholarship award winners.*** There are four basic criteria in the selection process. These are: Financial need, Scholarship, Citizenship and Potential for Christian Witness. To date there have been 156 recipients receiving over \$175,000 in scholarship awards.

It is imperative that you complete the application forms entirely. Incomplete or late applications will not be reviewed. **The deadline for applications is April 1, 2021.** Applications should be sealed in confidential envelopes and returned to the address listed below.

There is a form for three references attached to the application. We suggest that you provide an addressed envelope with postage affixed for each reference. **The deadline for references is also April 1, 2021.** Late references will not be accepted.

Applications and references should be addressed as follows:

Beacon Memorial Scholarship Trust  
c/o First United Methodist Church  
1115 South Boulder Avenue  
Tulsa, OK 74119-2492

Questions regarding the applications may be directed to my attention at the above address, to (918) 592-3862 or to the email address listed below.

Sincerely,  
Kyle Westfall, Chair  
Beacon Memorial Scholarship Trust  
[kylewestfall@fumctulsa.org](mailto:kylewestfall@fumctulsa.org)



# BEACON MEMORIAL SCHOLARSHIP APPLICATION

**APPLICATION DEADLINE IS APRIL 1, 2021**

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
                    *Last*                                      *First*                                      *M.I.*

Address: \_\_\_\_\_  
                    *Street Address*                                      *Apartment/Unit #*

                    \_\_\_\_\_  
                    *City*                                      *State*                                      *ZIP Code*

Phone: (     ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Church Membership or Affiliation: \_\_\_\_\_

## Educational Plans

College or University you plan to attend \_\_\_\_\_

How long do you plan to attend college? (Check the appropriate space.)

Summer session only \_\_\_\_\_ One Year \_\_\_\_\_ Two Years \_\_\_\_\_

Three Years \_\_\_\_\_ Four Years \_\_\_\_\_ Longer than Four Years \_\_\_\_\_

What course of study or major field of interest do you plan to follow?

\_\_\_\_\_

Do you plan to join a social fraternity or sorority? \_\_\_\_\_

What vocation do you plan to follow when you leave college? \_\_\_\_\_

**Please attach to this application a photograph of yourself (approximately 2"x3") which may be used for a news release if you are a scholarship recipient.**

## Academic History

List in chronological order the high school(s), college(s), or trade school(s) you have attended to date:

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ Degree: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ Degree or College Hours: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES ☐ NO ☐ Degree or College Hours: \_\_\_\_\_

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# BEACON MEMORIAL SCHOLARSHIP APPLICATION

## Academic Transcript

A copy of your transcript must be attached before the application is submitted to the committee. ***Your application cannot be processed without your transcript. If you are not presently a student, obtain the necessary transcripts before you submit the application.*** . If necessary the school can forward the transcript. Please provide your school with a stamped envelope addressed to: The Beacon Memorial Scholarship, 1115 S Boulder Ave Tulsa, OK 74119

## Extracurricular Activities

On the line following each of these activities briefly describe your participation. Write none beside the activities in which you did not participate.

Honor Societies \_\_\_\_\_

Special Honors and Distinctions \_\_\_\_\_

Student Government \_\_\_\_\_

Athletics \_\_\_\_\_

Drama \_\_\_\_\_

Music \_\_\_\_\_

Speech \_\_\_\_\_

Others \_\_\_\_\_

## Church and Civic Activities

List the church and civic activities in which you have been involved during the past four years.

## Financial Data

Will you have to pay non-resident fees? \_\_\_\_\_ Have you been awarded any other scholarship? \_\_\_\_\_

What is its financial value? \_\_\_\_\_ When will it expire? \_\_\_\_\_

What type of scholarship is it? \_\_\_\_\_

On the basis of your present planning, how much money will you need from a scholarship? \_\_\_\_\_

If you do not receive a scholarship, how do you plan to meet your financial need? \_\_\_\_\_

Will you be able to attend college if you do not receive a scholarship? \_\_\_\_\_

Are you receiving, or do you expect to receive any type of government grant in meeting your school expenses? \_\_\_\_\_

Explain \_\_\_\_\_

## BEACON MEMORIAL SCHOLARSHIP APPLICATION

### Financial Data (continued)

Do you own a car? \_\_\_\_\_ If so, please list the make and model \_\_\_\_\_

Is the car necessary in earning your livelihood? \_\_\_\_\_ How? \_\_\_\_\_

How much money have you earned over the past twelve months? \_\_\_\_\_

Do you plan on being employed during the coming school year? \_\_\_\_\_

If so, how much would you expect to earn? \_\_\_\_\_

Are there any person(s) financially dependent upon you? \_\_\_\_\_ If so, list their name(s) and relationship to you.

### Family Data

(This portion of Family Data is to be completed if you are currently a high school or college student)

Father's Name: \_\_\_\_\_ Is he living? \_\_\_\_\_  
*Last First M.I.*

Father's Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

*City State ZIP Code*

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

Business Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Is she living? \_\_\_\_\_  
*Last First M.I.*

Mother's Address (if different from Father's):

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

*City State ZIP Code*

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

Business Address: \_\_\_\_\_

Do you live with either or both parents? \_\_\_\_\_ If not, do you have a legal guardian? \_\_\_\_\_

Guardian's Name & Address: \_\_\_\_\_

Guardian's Occupation and Business Address: \_\_\_\_\_

Make and year of family automobile(s): \_\_\_\_\_

Total gross family income last year: \_\_\_\_\_

Number of persons dependent on this income: \_\_\_\_\_

Explain any extraordinary expenses affecting personal or family financial situation. \_\_\_\_\_

# BEACON MEMORIAL SCHOLARSHIP APPLICATION

## Family Data ( Continued))

What percentage of your college expenses can be paid for by your parents or guardian? \_\_\_\_\_

Are there other members of your immediate family attending college who are dependent upon the family income? \_\_\_\_\_

If so, how many? \_\_\_\_\_

(This portion of Family Data is to be completed if you are not currently a high school or college student OR if you graduated from high school more than four years ago.)

List the jobs you have held since high school or college graduation. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What is your marital status? \_\_\_\_\_ If you are married, is your spouse employed? \_\_\_\_\_

What was your family income last year? \_\_\_\_\_ Do you have minor children to support? \_\_\_\_\_

If so, how many? \_\_\_\_\_ Why do you now wish to enter or re-enter college? \_\_\_\_\_

## Essay

Please attach a separate page and answer the following question: ***How do you live out your Christian witness in your daily life?*** (1 page or approximately 500 words.)

## References

*Please list three personal references who are not your relatives to whom you have given Personal Recommendation Forms. For students entering directly from high school, one reference must be the high school principal or counselor.*

*Include such persons as ministers, teachers, employers or adult friends who can supply accurate information concerning you. Give the address and occupation of each person whose name you list. It is your responsibility to contact the persons you list and ask them to mail their Personal Recommendation Form and/or letter to: The Beacon Memorial Scholarship, 1115 S Boulder Avenue Tulsa, OK 74119. **NO APPLICATION CAN BE ACTED UPON WITHOUT THESE LETTERS OF REFERENCE.** It is suggested that you include a self addressed stamped envelope for your references to return their Personal Recommendation Form.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

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# BEACON MEMORIAL SCHOLARSHIP REFERENCE

**REFERENCE DEADLINE IS APRIL 1, 2021**

## Personal Recommendation Form

Applicant's Name: \_\_\_\_\_

School: \_\_\_\_\_

The person listed above is an applicant for a scholarship provided by the Beacon Memorial Scholarship Endowment Trust, Tulsa, Oklahoma. In awarding scholarships, it is the concern of the committee to select the most worthy applicants from the standpoint of financial need, character and capacity to profit from further education. We must rely on you to aid us in this decision, and we appreciate your frank appraisal of the applicant. **All information submitted will be regarded as confidential.**

After filling out this form, the person signing it should mail it directly to Beacon Memorial Scholarship Trust c/o First United Methodist Church, 1115 South Boulder Avenue, Tulsa, OK 74119-2492.

1. How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

2. On the basis of your knowledge concerning the applicant's financial status, please check the section below which best describes applicant's need:

- a. Unable to attend school without a scholarship \_\_\_\_\_
- b. Could attend school without a scholarship, but would have to be employed \_\_\_\_\_
- c. With careful planning could attend school without scholarship or employment \_\_\_\_\_
- d. Does not need the scholarship \_\_\_\_\_
- e. Financial status unknown \_\_\_\_\_

3. From the standpoint of character, is there any reason why this applicant should not receive a scholarship?

YES NO  
☐ ☐ Please Explain:

4. Any additional remarks or comments: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Street Address

Apartment/Unit #

City

State

ZIP Code

Date: \_\_\_\_\_ Occupation or  
Official Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Street Address

Apartment/Unit #

City

State

ZIP Code

Date: \_\_\_\_\_ Occupation or  
Official Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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