



Ocean View United Methodist Church

8400 East Oak Island Drive

Oak Island NC 28465

910-278-5973

### **Marge Stuckey Scholarship**

The United Women in Faith of the Ocean View United Methodist Church are pleased to offer one \$1,000 scholarship and one \$500 in honor of the late Marge Stuckey. This scholarship is awarded to a graduating high school senior who is a member of Ocean View UMC, actively participates in the life of the church, or has parents or grandparents associated with Ocean View UMC.

Qualifications for application are as follows:

- Must be a 2024 High School graduate
- Must be a member of Ocean View UMC, actively participates in the life of the church, or has parents or grandparents associated with OVUMC
- Must plan on attending an accredited institution of higher learning after graduation
- Complete a written essay, as noted on the application

Applications are due by Monday May 13, 2024, and can be mailed to Ocean View United Methodist church, Women in Faith, at the address above, Attention Carolynn Bell, scholarship committee.

Applications may be emailed to [oceanviewumw@gmail.com](mailto:oceanviewumw@gmail.com), noting scholarship application in the subject line.

Carolynn Bell

Ocean View United Women in Faith

MARGE STUCKEY SCHOLARSHIP APPLICATION

OCEAN VIEW UNITED WOMEN IN FAITH  
8400 East Oak Island Avenue  
Oak Island, NC 28465  
910-278-5973

FULL NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ phone # \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PARENTS NAMES \_\_\_\_\_

Member of Ocean View UMC? \_\_\_\_\_yes \_\_\_\_\_no

If no, relative affiliated with Ocean View UMC \_\_\_\_\_

Are you active in a faith-based group? \_\_\_\_\_yes \_\_\_\_\_no

If yes, describe your involvement:

\_\_\_\_\_  
\_\_\_\_\_

**Attach an essay on this question: If our purpose, over the course of our lives, is to help others, in what way do you see yourself accomplishing this purpose through your faith and education??**

Expected course of study? \_\_\_\_\_ Where? \_\_\_\_\_

**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 provided.

Signature of applicant \_\_\_\_\_ date \_\_\_\_\_