

St. James United Methodist Church  
512 St. James Avenue  
Goose Creek, SC 29445  
843-553-3117

### **Schliewert Memorial Scholarship**

Schliewert Memorial Scholarship is given in memory and gratitude of Mr. Michael Schlievert's grandparents, Olga Julius and Charles Frederick Schliewert, who raised and supported Mr. Schlievert during his childhood years. Mr. Schlievert desires to encourage students to meet their full God-given potential by helping with financial assistance towards their education. Two \$2500 college scholarships are available to be awarded annually.

To qualify the applicant must:

- Attend Charleston District United Methodist Church and/or Berkeley County high school.
- All applicants MUST attend public high school and are required to have a GPA higher than 2.5 on a 4.0 scale.
- This scholarship will consider community service activities, as well as future plans to be involved in community service.
- This scholarship can be used for a 2-year technical college/community college or a 4-year college/university undergraduate program of study.
- An individual may apply for an additional year of scholarship assistance based on academic success of previous year for up to 4 years of school. A new application must be completed each of these years. The scholarship will not be automatically renewed or guaranteed.
- Recipients will be awarded the scholarship at a designated worship service at St. James United Methodist Church, Goose Creek, SC.
- The scholarship money will be paid directly to the designated college by the Treasurer of St. James United Methodist Church. One-half of the award will be paid the first semester, and the other half of the award will be disbursed the second semester, upon notification of successful completion of the first semester term. Recipient will be notified of payment to designated school. Any overpayment or refund will be returned to St. James UMC.
- The Scholarship Committee of St. James United Methodist Church will make the final selection of recipients and will notify all applicants.
- Applications must be received by May 1.
- Applications must be downloaded on the church's website: [stjamesumcgc.org](http://stjamesumcgc.org). A completed application is to be mailed or hand-delivered to this church at the above address.
- High school guidance counselor or college dean/advisor must complete the form concerning academic achievement.
- An official school transcript must be received by May 1.
- Letter of recommendation is to be included from applicant's pastor or youth leader.
- Applicant is required to include a personal statement.

**St. James United Methodist Church Goose Creek, South Carolina**

**Application for the Schliewert Memorial Scholarship**

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

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

E-mail Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name and Address of Home Church: \_\_\_\_\_

\_\_\_\_\_

Name of High School: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

Name and address of institution of higher learning to which you have been accepted or are now attending:

\_\_\_\_\_

Anticipated date of graduation: \_\_\_\_\_

Have you applied for this scholarship before? \_\_\_\_\_ If so, what year? \_\_\_\_\_

On a separate page, applicant is to write a personal statement including the following:

1. Reason for applying for this scholarship.
2. List of community/church/school activities and accomplishments.
3. Plan of study at school, and future plans and goals.

Other documents which must be included with this application form:

1. Official school transcript to be sent directly to St. James United Methodist Church, 512 St. James Ave., Goose Creek, SC 29445, to the attention of the Scholarship Committee.
2. Form to be completed by high school guidance counselor or college dean/advisor which is to be returned to applicant in a sealed envelope.
3. A letter of recommendation from your church pastor or youth leader.

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**Schliewert Memorial Scholarship**

High School Guidance Counselor

**Applicant completes first two lines.**

Name of student \_\_\_\_\_

Home address \_\_\_\_\_

**Guidance Counselor, the scholarship committee would greatly appreciate your help in answering the following questions concerning the above-named scholarship applicant. Your responses will remain confidential. Thank you.**

What is this student's class rank? \_\_\_\_\_

What is this student's Grade Point Average? (on a scale of 4.0) \_\_\_\_\_

Is this student in the upper 30% of the graduating class? \_\_\_\_\_

What is this student's expected date of graduation? \_\_\_\_\_

Please attach any additional information you may wish to provide that would help the scholarship committee evaluate this student.

This student must send an official school transcript directly to the scholarship committee at the address listed at the top.

**Please return this form to the applicant in a sealed envelope. The entire application packet must be postmarked no later than May 1.**

School name \_\_\_\_\_

Guidance Counselor signature \_\_\_\_\_

Date \_\_\_\_\_ Printed name \_\_\_\_\_

Daytime phone and e-mail address \_\_\_\_\_

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**Schliewert Memorial Scholarship**

Dean or Advisor

**Applicant completes first two lines.**

Name of student \_\_\_\_\_

Home address \_\_\_\_\_

**Dean/Advisor, the scholarship committee would greatly appreciate your help in answering the following questions concerning the above-named scholarship applicant. Your responses will remain confidential. Thank you.**

What is this student's Grade Point Average? \_\_\_\_\_

What is this student's anticipated date of graduation? \_\_\_\_\_

Is this student enrolled in a full-time or part-time course of study? \_\_\_\_\_

The scholarship committee welcomes any additional information you may wish to provide that would help in the evaluation of this student. Please attach.

This student must send an official school transcript directly to the scholarship committee at the address listed at the top.

**Please return this form to the applicant in a sealed envelope. The entire application packet must be postmarked no later than May 1.**

School name \_\_\_\_\_

Dean/Advisor signature \_\_\_\_\_

Date \_\_\_\_\_ Printed name \_\_\_\_\_

Daytime phone \_\_\_\_\_

E-mail address \_\_\_\_\_

St. James United Methodist Church  
Goose Creek, SC  
Schliewert Memorial Scholarship

**Completed Application Checklist:**

- \_\_\_\_ 1. Completed application form
- \_\_\_\_ 2. Personal statement attachment
- \_\_\_\_ 3. Current official school transcript sent directly to St. James United Methodist Church Scholarship Committee (address below)
- \_\_\_\_ 4. Academic achievement form in a sealed envelope from high school guidance counselor (if completing high school) or college dean/advisor (if already attending college)
- \_\_\_\_ 5. Letter of recommendation from church pastor or youth leader

Applicant's Signature \_\_\_\_\_

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

Everything listed above must be sent to the following address postmarked no later than May 1.

Mail to:

**Scholarship Committee**  
**St. James United Methodist Church**  
**512 St. James Avenue**  
**Goose Creek, SC 29445**  
843-553-3117  
St\_jamesumc@comcast.net