Fairfield Grace United Methodist Church 1089 Fairfield Woods Rd., Fairfield, CT 06825-3229 (203) 374-6528 or Fax (203) 372-0179 or fairfieldgrace@sbcglobal.net

HAROLD AND BETTY HARRIS SCHOLARSHIP FUND

Re-application for Scholarship Award (2016-2017)

(Please send this completed form with attached letters of recommendation to the church office)

NO LATER THAN APRIL 15

Name	Telephone (Home and Cell)
Home Address	
College/Univ. Address	Email/Text
Your class level next fall: Soph/Jr./Sr	Current GPA
(PLEASE ATTACH LETTER OF RE	n home from college:
How are you keeping an active faith life v	
	llege or during breaks and summers: COMMENDATION FROM AN ADULT WHO HAS RVED YOUR PARTICIPATION IN ACTIVITIES)
What are your objectives for the future, a	and how will your faith life be part of it?
(PLEASE FILL OUT FORM COMPL	ETELY. USE SEPARATE PAGES IF NEEDED)

ADDITIONAL INFORMATION