

The United Methodist Church of Monticello
Gene Smith Memorial Peacemaker Scholarship

Name: _____ Date: _____

Address: _____ Date of Birth: _____

Phone Number: _____ e-mail address: _____

Parents Names: _____

Grade Point Average: _____ College you will be attending in the Fall: _____

Field of study/Major: _____

List of School Activities & Honors: _____

List Community (non-school) Activities & Honors: _____

Short Statement on how your conduct & values demonstrate being a peacemaker: _____
