

POTTER SCHOLARSHIP  
AT  
NEOSHO COUNTY COMMUNITY COLLEGE

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

What are your career goals?

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

List activities in which you are now or have been involved.

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

What other scholarships or financial aids will you be receiving for this academic year?

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

Signed \_\_\_\_\_ Date \_\_\_\_\_

*(Return to the office of the First United Methodist Church no later on June 1<sup>st</sup>.)*