

**SHARON UNITED METHODIST CHURCH**

The Rev. Bradley Williams, Pastor  
275 Poplar Branch Road – P. O. Box 182  
Poplar Branch, North Carolina 27965  
Phone: 252-453-2806

**2020 NURSE LUCY SCHOLARSHIP**

The family of Lloyd and Olive Forbes Bateman established a Memorial Scholarship in the name of each of their parents. Sharon United Methodist Church is honored and privileged to be the administrator of the \$1,000 Lloyd Bateman Scholarship and the \$1,000 Nurse Lucy Scholarship. The scholarships are open to members of Sharon United Methodist Church, to children and grandchildren of members of Sharon United Methodist Church, and to active participants of Sharon's youth group.

Participants in the Nurse Lucy Scholarship must complete the 2020 Application for the Nurse Lucy Scholarship and submit a completed application no later than **May 15, 2020**.

Criteria for the scholarship is stated on Page 2. You may phone me at 252-453-2084 if you have questions concerning this scholarship application.

Enclosed is an application for the **NURSE LUCY SCHOLARSHIP**. Completed applications, including the application form, an essay written in cursive in blue or black ink, an official transcript, and three letters of recommendation, that must be sealed with the signature of the person submitting the recommendation and signed over the sealed flap on the back of the envelope, must be received either at Sharon United Methodist Church or postmarked U. S. mail by **May 15, 2020**. The mailing address is:

Sharon United Methodist Church  
Nurse Lucy Scholarship/Attn. Susie Spruill  
P. O. Box 182  
Poplar Branch, NC 27965

Directions for returning the completed applications are printed on page four. Please contact me at 252-453-2084 if you have questions concerning this scholarship.

Yours in Christ,

Susie G. Spruill

encl.

## 2020 APPLICATION FOR THE NURSE LUCY SCHOLARSHIP

The **NURSE LUCY SCHOLARSHIP** is established by the family of Olive Forbes Bateman, in her memory. The one thousand dollar (\$1,000) scholarship will be awarded based on the following:

- The recipient must have maintained a minimum of a “C” average in the secondary or post-secondary school attending or last attended.
- The recipient must be pursuing a degree in a medical field at a university, college, community college, technical school, or hospital.
- The recipient must be accepted by the institution he/she plans to attend and into the program he/she plans to pursue.

The **NURSE LUCY SCHOLARSHIP** will be paid directly to the institution that the recipient is attending and may be used for tuition, books, laboratory fees, or other fees directly required for the MEDICAL program in which the recipient is enrolled. It is anticipated that this \$1,000 Nurse Lucy scholarship will be used for educational expenses one year from the date the scholarship is awarded. The recipient, however, may request in writing an extension for a second year. A scholarship not used during the first year and having no written request for a second year extension will be terminated and the funds returned to the general Bateman Scholarship account.

### ***PART I: General Information***

**Complete the following in blue or black ink:**

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

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

Phone No. (Home): \_\_\_\_\_ Cell: \_\_\_\_\_

Social Security No: \_\_\_\_\_

School currently attending; if not currently enrolled, last school attended in the space below:

\_\_\_\_\_ Current GPA: \_\_\_\_\_

Institution you plan to attend: \_\_\_\_\_

Have you applied? \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Medical Field of study you plan to pursue: \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

### ***Part II: Essay***

On the following essay form, **write in cursive with blue or black ink**, an essay in which you specifically define the medical career you plan to pursue. Tell how this scholarship would be important for you to pursue the academic requirements for your course of study, and include school, church, and community activities that have been important in your life.



**Part III: Letters of Recommendation**

Enclose letters of recommendation from the three people listed below with your application. The letters must be sealed with the writer’s signature signed across the sealed portion of the back of the envelope.

Name:	Address:	Phone No.
1.		
2.		
3.		

**Part IV: Directions for Returning the Application**

This completed application including an essay, an official transcript and all letters of recommendation must be mailed to the address below with a dated postmark on or before **May 15, 2020**.

**Mail application and letters of recommendation to:**

Sharon United Methodist Church  
 Nurse Lucy Bateman Scholarship/S. Spruill  
 P. O. Box 182  
 Poplar Branch, NC 27965

Contact Susie G. Spruill at 252-453-2084 if you need additional information.