Nomination / Letter of Recommendation for the
Linda Hankins' Memorial Young Women's Scholarship

Please print, fill out, and return applications to the Lakeside Church Office not later than April 27th
Please limit your response to the front of this page.

Lakeside United Methodist Church
2900 Smallwood Dr. West
Waldorf, Maryland 20603

Name of Applicant: _____ Applicant's Date of Birth: _____
(Last, First, MI)

Applicant's address & home phone: _____

_____

Your Name: _____
(Last, First, MI)
Your address & phone number: _____

_____

Your Occupation: _____

Your acquaintance / relationship to the Applicant (Please circle one):
Pastor / Church Member / Teacher or Professor / Supervisor / Friend

Describe why you feel the applicant should be considered for this scholarship.

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Your Signature: _____ Date: _____