



# HENDRIX

## Nomination for the Hendrix United Methodist Youth Fellow Scholarship

Student Nominated: \_\_\_\_\_  
*Last First Middle (Preferred)*

Address: \_\_\_\_\_  
*Number & Street City State Zip*

E-mail Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

High School: \_\_\_\_\_ Grad. Year: \_\_\_\_\_  
*Name City State Zip*

Please list this student's leadership activities within the United Methodist Church.

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Name of person submitting nomination: \_\_\_\_\_

Position: \_\_\_\_\_

Church: \_\_\_\_\_

Address: \_\_\_\_\_  
*Number & Street City State Zip*

E-mail Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this form as soon as possible, but no later than December 2.** If you have questions concerning this form or the UMYF Scholarship, please contact the Hendrix Office of Admission at 800-277-9017.

**Please fax this completed form to 501-450-3843 or mail to:**  
Hendrix College Office of Admission • 1600 Washington Avenue • Conway, AR 72032-3080