

MISSIONARY CHURCH MINISTERIAL SEMINARY
Scholarship Application



Deadlines: Fall - August 1: Spring - January 1

New applicant form

The following documents should be included with initial application

- 1) Transcript of junior/senior years of undergraduate education
- 2) Current photo
- 3) Statement describing your call to Christian ministry
- 4) Document verifying course enrollment of the academic institution in which enrolled
- 5) If not currently licensed with the Missionary Church, please complete and attach: Ministerial License Application Parts I & II

Applicant Information

Full Name: _____ Date of Birth: _____
First M.I. Last

Address: _____
Street City State ZIP

Phone: _____ Email: _____

Marital Status: Single Engaged Married Name of Spouse if married: _____

If engaged, give full name, age and address of fiancée and anticipated date of marriage:

Name Age Address City State ZIP Wedding Date

Children: (names & ages) _____

Missionary Church of which you are a member: _____
Church City

References:

_____ <small>Pastor</small>	_____ <small>Laymen</small>	_____ <small>Professor (in major field of study)</small>
_____ <small>Complete Address</small>	_____ <small>Complete Address</small>	_____ <small>Complete Address</small>

Education: (colleges/seminaries) _____

Seminary/graduate school you plan to attend: _____

	<small>Name</small>	<small>Address</small>
Anticipated enrollment date: _____	Are you enrolled in an M. Div. Program: YES NO	
Date of graduation: _____	Degree being earned: _____	Curriculum Major: _____
Full time student: YES NO	Anticipated date of availability for assignment by church: _____	

Attach a statement describing your call to Christian ministry: Indicate 1st, 2nd, 3rd, etc. choices from among the following:

- Pastorate
- Evangelism
- Church Planting
- Teaching
- Specialized Ministries
- Missionary Service
- Other (please indicate) _____

Signature

I hereby apply for scholarship assistance from the Missionary Church while pursuing an approved course of study at:

_____ during the _____ - _____ academic year.
Name of Institution Semester year year

Signature of Applicant _____ Date _____