CONTINUING EDUCATION SCHOLARSHIP PASTORS & LAYMEN

Application Form

(The maximum scholarship available per semester is \$150.00)

What is your reason for pursuing additional training for ministry?	
I. Contact Information	
Applicant's Name	Date:
Parent/Guardian Name(s)	
Applicant's Address:	
E-Mail Address:	
E-Mail Address: Cell Phone: ()	
E-Mail Address: Cell Phone: () Please, indicate your current s	
E-Mail Address: Cell Phone: () Please, indicate your current s	status:
E-Mail Address: Cell Phone: () Please, indicate your current segments. Pastor II. Institution Information:	status: