

APPLICATION FORM

Scholarship Committee
Christian Church in Kansas
5230 Broadway
Great Bend, KS 67530

THIS FORM IS DESIGNED FOR USE BY THOSE
REQUESTING FINANCIAL AID TOWARD TRAINING
FOR PROFESSIONAL MINISTRY WITH THE
CHRISTIAN CHURCH (DISCIPLES OF CHRIST).
FOR OFFICE USE ONLY

R _____ A. _____

1. NAME _____ HOME PHONE (_____) _____
2. HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____
3. DATE OF BIRTH _____
4. CHURCH OR EMPLOYER _____ WORK PHONE (_____) _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
5. HOME CHURCH _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____
6. SEMINARY YOU WILL BE/ARE ATTENDING _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
7. STANDING FOR TERM OF THIS APPLICATION PART-TIME _____ FULL-TIME _____
SEMINARY 1 2 3 3+
8. HOW MANY HOURS ARE YOU PLANNING TO TAKE EACH TERM?
FALL _____ SPRING _____
9. DEGREE TOWARD WHICH YOU ARE WORKING? _____
ANTICIPATED GRADUATION DATE _____
10. TO ASSIST IN DETERMINING NEED, THE FOLLOWING INFORMATION WOULD BE HELPFUL.
ARE YOU MARRIED? _____ NEVER MARRIED? _____ DIVORCED? _____ WIDOWED? _____
HOW MANY DEPENDENTS DO YOU HAVE? _____ AGES _____
RELATIONSHIP OF DEPENDENTS _____

11. ESTIMATED COST OF PROGRAM
NEXT SEMESTER

TUITION AND FEES _____
BOOKS _____
ROOM _____
MEALS _____
OTHER _____
TOTAL COSTS \$ _____

12. ESTIMATED RESOURCES AVAILABLE FOR EDUCATION
NEXT SEMESTER

FAMILY SUPPORT _____
SPOUSE'S INCOME _____
LOCAL CHURCH _____
HOME CHURCH _____
SCHOLARSHIPS _____
GRANTS _____
WORK STUDY _____
OTHER WORK _____
TOTAL RESOURCES \$ _____

13. ESTIMATED NEED REMAINING **NEXT SEMESTER** \$ _____

14. IT IS MY UNDERSTANDING THAT THE SEMINARY WILL APPLY SCHOLARSHIP FUNDS RECEIVED FROM THE SCHOLARSHIP COMMITTEE OF THE CHRISTIAN CHURCH IN KANSAS TOWARD MY TUITION AND FEES. I FURTHER UNDERSTAND THAT I MAY REQUEST THE USE OF MONEY BEYOND TUITION AND FEES TO BE RELEASED FOR EXPENSES RELATED TO MY TRAINING TO BE IN PROFESSIONAL MINISTRY WITH THE CHRISTIAN CHURCH (DISCIPLES OF CHRIST).

SIGNATURE _____ DATE _____

APPLICATION CAN BE MAILED TO: SCHOLARSHIP COMMITTEE
5230 BROADWAY
GREAT BEND, KS 67530-3208
FAX: 620/792-1268

RELEASE OF GRADES AND PROGRESS REPORT

The Scholarship Committee and the Christian Church in Kansas, with the awarding of scholarship aid, will be working in partnership with the recipient and the Institution of Higher Education in training for ministry. Checks will be sent through the Seminary. Since the regional church must be consciously aware of its stewardship and as an encouragement to the student, the committee requests that the student release a report of the student's grades and progress from the Seminary with the end of each term for which scholarship aid is received.

I authorize the release of my grades and progress report by the Administration of the Seminary that I am attending to the Scholarship Committee, Christian Church in Kansas, 5230 Broadway, Great Bend, KS 67530, from whom I am receiving scholarship aid.

SIGNED: _____

DATE: _____