

Please write a brief statement of your (a) previous school experience, (b) conversion experience, (c) call into Christian service, and (d) present church activities. (If you need additional space, add the necessary sheet or sheets).

After you have completed your education, to determine whether you are engaged in full-time employment in the ministry or in the ministry or in specific religious work, you should meet the following requirements.

1. You must be in the Christian Ministry or engaged in religious work in a church or an institution or agency of a religious nature.
2. You must be employed full-time for several years in the ministry or religious work.
3. You should be employed and paid by a church or an institution or agency doing Christian work.
4. Full-time employment in the ministry or religious work must include a major component of work specifically identified as religious work requiring definite preparation, such as preaching, pastoral duties, music ministry, director of religious education, teaching Bible and religion, missionary work, and similar activities.

**IF YOU DO NOT MEET THE ABOVE QUALIFICATIONS, YOU MUST REPAY THE GRANT IN ACCORDANCE WITH THE TERMS ARRANGED BY THE CHRISTIAN SERVICE ORGANIZATION.**

*I hereby certify that the information contained in this application is true, complete, and correct to the best of my knowledge and belief. In the event a scholarship is made to me, I promise to use it for no other purpose than the necessary expenses of continuing my education. I certify that I have read and have understood the terms and conditions of this scholarship, and I approve and accept the requirements contained in them.*

*If a scholarship is made to me, I further promise:*

- To answer promptly all letters relating thereto;
- To keep the secretary of the Christian Service Organization informed of my address and advised of the character of my work and my remuneration as long as such information is requested by the Christian Service Organization.
- The undersigned agrees, if aid is granted, to devote his/her best efforts to the educational opportunity afforded by this aid.

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

Signed: \_\_\_\_\_ (Signature of the Applicant)

# Scholarship Application

Applicant's Name





**I. BEFORE COMPLETING THIS FORM:**

- 1. Read the contents carefully.
- 2. Please prepare to answer each question completely.
- 3. Read and understand the rules governing the Christian Service Organization.

ID # \_\_\_\_\_  
*(For office use only)*

II. You will be held responsible for understanding and complying with the requirements of the application.

III. Should you decide to cancel your application, please notify the Director of Financial Planning, who in turn will notify the Christian Service Organization.

**GUIDELINES FOR RECIPIENTS OF SCHOLARSHIP AID**

- A. 1. UNDERGRADUATE RECIPIENTS MUST BE FULL-TIME STUDENTS PREPARING FOR FULL-TIME CHRISTIAN VOCATIONAL MINISTRY. FULL-TIME STUDENTS ARE STUDENTS CARRYING 12 OR MORE SEMESTER HOURS.
- 2. DIVINITY SCHOOL RECIPIENTS CAN BE PART-TIME STUDENTS PREPARING FOR FULL-TIME CHRISTIAN VOCATIONAL MINISTRY. DIVINITY SCHOOL STUDENTS MUST CARRY AT LEAST 3 HOURS TO BE CONSIDERED PART-TIME.

B. Priority will be given to students majoring in Church Music, Religion, and Religious Education in the undergraduate program and those seeking a Master of Divinity and Doctors of Ministry in our School of Divinity.

C. The recipients must maintain an overall 2.5 grade point average. This does not apply to first semester students.

D. Recipients must be of unquestionable moral character.

E. Recipients are encouraged to participate in the ministry opportunity, such as Ministerial Education Days, Internships, Prison Ministry, and/or Mission work in their vocational choice at a church.

F. Any recipient who terminates his/her full-time Christian vocational work or preparation for that work must repay the scholarship to the Organization with 4% interest per annum from the date of such termination or graduation from college.

G. Recipients will not be required to repay the scholarship except for the above stated reasons. However, they will be expected to become members of the Christian Service Organization and to encourage others to do the same.

H. RECIPIENTS WILL BE REQUIRED TO ATTEND THE CHRISTIAN SERVICE ORGANIZATION DINNER MEETINGS AS GUESTS OF THE ORGANIZATION.

I. Recipients will need to have 3 individuals (pastor, teacher, well-known person) complete the Online Reference Form at [www.gardner-webb.edu/cso-reference](http://www.gardner-webb.edu/cso-reference).

The application must be received by the Financial Planning Office before June 1 to be considered for the Fall Semester, and before December 1 to be considered for the Spring Semester.

Please read the above paragraphs carefully so you will understand fully the terms of the scholarship. Completed applications should be mailed to the Financial Planning Office, P.O. Box 955, Gardner-Webb University, Boiling Springs, NC 28017.

Full Name: \_\_\_\_\_

(a) If married, name of spouse \_\_\_\_\_

(b) Names and ages of Children \_\_\_\_\_

Present Address: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Name of Father or Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_

Name of Mother or Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_

Permanent home address of parents or guardian: \_\_\_\_\_

\_\_\_\_\_

When do you plan to enroll? \_\_\_\_\_

- 1. Program to which you are applying  Divinity  Undergraduate  Degree Completion (GOAL)

2. Student Status:  New or  Current Student

For what type of ministry are you preparing? \_\_\_\_\_

References: Give the name and addresses of three references: (Your pastor, a teacher, and another person by whom you are well known)

Name	Email	Phone
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Name	Email	Phone
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Name	Email	Phone
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Have you completed the required Financial Aid Form? \_\_\_\_ If not, contact Financial Planning Office for an application. THIS IS A REQUIREMENT FOR AID CONSIDERATION.