

Indiana District Scholarship Fund for Assemblies of God Universities

Personal Information:

Name: _____

Address: _____

Phone: _____ Date of Birth: _____

Email address: _____

Today's Date _____ College Planning to Attend _____

Educational Information:

Rank after seven (7) semesters (Freshman through middle of Senior year):

_____ out of _____ GPA: _____ / 4.0

SAT scores: Math _____ Verbal _____ Writing _____

Intended major: _____

Family Information:

(Please list the following information for the person who reports you as a dependent on their income tax)

Father/Guardian: _____

Occupation: _____ Employer: _____

Mother/Guardian: _____

Occupation: _____ Employer: _____

Please list the first name of your siblings, their ages, and occupation if applicable:

_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional Information:

How do you expect to finance your college expenses? List the sources as a percent (%).

_____ parents _____ loans _____ scholarship/grants _____ other

List the town & name of your church: _____

What is the pastor’s name: _____

How long have you been attending this church? _____

Please describe your salvation experience and baptism of the Holy Spirit (if applicable)

Describe any extra-curricular activities you have been involved with at your local church:

Please list your honors, awards and extra-curricular activities during High School including this year:

References:

Give two names of individuals from your local church that would be able to comment on your personal qualifications and reliability:

1. Name: _____ Email: _____ Phone: _____

2. Name: _____ Email: _____ Phone: _____

Please give the name of a teacher from your school that would be able to comment on your personal qualifications and reliability:

Name: _____ Email: _____ Phone: _____

Attach a one page double-spaced essay explaining your goals and career into which you feel God is leading you. How does this scholarship apply?