



Congregational Methodist Church
SCHOLARSHIP PROGRAM
PASTORAL & MISSION SCHOLARSHIP
APPLICATION

Deadline: This application form and all other required documentation must be received by July 15th (Fall Semester) or December 15th (Spring Semester).

Mail to: CMC Pastoral Scholarship Program, P.O. Box 9, Florence, MS 39073.
 Email to: jwoods@cmchq.net

SCHOLARSHIP ELIGIBILITY: *Students must meet these criteria to be eligible.*

- ___ * I confirm that I am a faithful believer in Jesus Christ as my Lord and Savior.
- ___ * I confirm that I am an active minister and/or leader in a CM Church.
- ___ * I am currently enrolled or accepted in a Christian College, Seminary, or Mission Training School pursuing a Pastoral, Biblical or Missionary Studies Degree.
- ___ * I am committed to the future support and work in the various ministries of the Congregational Methodist Church.

PERSONAL INFORMATION:

***First Name** _____ ***Middle** _____ ***Last** _____

If different than your formal name, what do you prefer to be called? _____

***Home address:**

Mailing Address

City

State

Zip

***Primary Contact:**

Email:

Cell Phone:

***Date of Birth (MM/DD/YYYY):** _____ / _____ / _____

***Have you received a CMC Pastoral Missionary Scholarship before?**

___ Yes ___ No.

If Yes, What Year? _____

Students reapplying must show evidence of course completion with a grade not less than a B.

CHURCH AFFILIATION:

Name of Church: _____ Church Phone: _____

Years attending: _____ Active Member: ___ Yes ___ No

Current Ministry/Volunteer Title or Duties: _____

PERSONAL REFERENCES:

Ref #1:

Name: _____ Relationship _____ Phone/Email: _____

Ref #2:

Name: _____ Relationship _____ Phone/Email: _____

COLLEGE INFORMATION:

(Attach a copy of most recent college transcript)

***Classification next Semester:** _____

(Freshman, sophomore, junior, senior, graduate, PhD candidate, postgraduate)

***Currently Enrolled:**

College Name: _____ Registrar Name/Phone: _____

College Mailing Address: _____

Current Course of Study: _____ Current GPA: _____

Anticipated year of graduation: _____ Degree Completion Classification _____

***Not Enrolled, But Accepted:**

___ Yes ___ No

If yes, a copy of your acceptance letter must be attached to this application.

No funds will be issued until you submit a copy of your statement from the school showing you are enrolled and the business office address where payment will be sent.

List any other postsecondary institutions you have attended:

Name: _____ City: _____ State: _____ Years: _____

Name: _____ City: _____ State: _____ Years: _____

Name: _____ City: _____ State: _____ Years: _____

The Essay:

(Attach a copy of your essay)

What does the scholarship committee need to know about you in 1,000 words or less? The committee members will be especially interested in these points:

1. Describe your most notable qualities
2. Describe your ministerial calling
3. Explain how your course of study will benefit your ministerial calling
4. Provide examples of your demonstrated leadership ability
5. Describe your commitment to the future of the Congregational Methodist Church.

The essay is limited to two double spaced print pages.

21. *Certification Statement:

By signing my name below, I confirm that all of the information provided above and in the accompanying documents is true and correct to the best of my knowledge.

Signed: _____ Date: _____