



Christian Ministry Scholarship Application

This application is **due by May 31**. Late submissions will not be accepted.

Please send to **info@febcministries.org**

Basic Information:

Last name:	First name:		
Email:	Phone:		
Address line 1:			
Address line 2:			
City:	State/Prov.:	Zip/Postal:	
Is this application for Continuing Education (Graduate/Post Graduate studies)?		YES	NO

Education Plans:

School name:			
School address:			
School city:	State/Province:	ZIP/Postal:	
Have you been accepted?	YES	NO	Year of study:
Major:	Minor:		
Does the school's doctrinal statement agree with the FEBC Articles of Faith?		YES	NO

If not, what is different or missing?

Link to school doctrinal statement (or attach scan):	
Current GPA/school average?	College credit hours completed:

My goal in attending Bible School is...

Are your parents supportive of your plans?

Summer plans:

What are your summer plans (ministry/work):

Ministry name or employer:

Anticipated duties/roles:

Church Involvement:

Are you a member of or do you regularly attend an FEBC Church? Yes No

Home church city: _____ Home FEBC church name: _____

How long have you been regularly attending an FEBC church? _____

How does your church minister to you?

How do you serve in your church and why?

What church do you plan to attend when at school?

How do you plan to serve in this church?

Financial Information:

Who provides your principal support for school? Self Spouse Parent/Guardian

How do you plan on paying for school?

What is your expected cost for a year of school?

Have you received this scholarship before? Yes No If yes, when?

Pastoral Reference:

Name of pastor filling out reference: _____ Pastor's role: _____

Church phone number: _____ Pastor's email: _____

Final Details:

I certify that the information given above, which FEBC is authorized to verify, is true and correct. This application will remain the property of the FEBC whether approved, not approved or withdrawn.

Student signature (may be typed): _____ Date: _____

To be filled out by parent of guardian of DEPENDENT student only:

I have read this application and to the best of my knowledge and belief, it is correct. I understand that my signature does not infer any financial responsibility on my part.

Parent/guardian signature (may be typed): _____ Date: _____

This application is **due by May 31**.
Please send to **info@febcministries.org**.

*Scholarship recipients will be selected at the FEBC annual meeting in mid-July.
You will be notified by July 31 whether you have been awarded a scholarship.*