



# FEBC Pastor & Global Partner Scholarship Application

Intended for FEBC pastors and FEBC approved global partners  
already in career ministries as pastors or missionaries.  
This application is **due by May 31**. Please send to **office@febministries.org**

### Tell us about yourself

First name: \_\_\_\_\_ Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 Agency/Employer: \_\_\_\_\_ For how long? \_\_\_\_\_  
 Current Ministry:  
 \_\_\_\_\_

Church Currently Attending: \_\_\_\_\_ Location: \_\_\_\_\_  
 FEBC Church Where Member: \_\_\_\_\_ City & Stat/Prov: \_\_\_\_\_

### Tell us about your plans

College/University Name: \_\_\_\_\_  
 College/University Address: \_\_\_\_\_  
 Program or Course of Study: \_\_\_\_\_  
 Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_  
 Have you been accepted? Yes No  
 What degree or certificate will you earn through this study?  
 Estimated annual tuition expenses: \_\_\_\_\_  
 Does the school doctrine agree with the FEBC Statement of Faith? Yes No N/A  
 Complete the sentence: *This study is important for my ministry because . . .*

\_\_\_\_\_

Have you received this scholarship before? Yes No If yes, what year(s)? \_\_\_\_\_

**Certification**

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This application shall remain the property of the FEBC whether approved, not approved, or withdrawn.*

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Signature of Applicant (may be typed)

Date

**This application is due by May 31.**  
Please send to [office@febcministries.org](mailto:office@febcministries.org)

*Thank you for applying for an FEBC Pastor & Global Partner Scholarship.  
Selection of scholarship recipients will be announced at the FEBC annual meeting.  
All applicants will be notified by July 31 whether or not they have been awarded a scholarship.*