

Application For Scholarship Assistance

Please answer all questions, as the scholarship committee cannot process your application without complete information. Scholarships are granted on the basis of eligibility and the availability of funds.

Name: _____ Phone: (____) ____ - ____

Address: _____

Home Church: _____

Male (____) Female (____) High School GPA _____ ACT score ____

Will you be a full-time student this fall, spring? _____ part-time _____

Have you committed your life to full-time Christian ministry? _____

What specific type of ministry do you anticipate? ___Pulpit (Pastor) ___Missionary ___Youth Pastor ___Sunday School Director ___Evangelist ___Bible College Staff ___Preacher
___Other (describe) _____

Marital Status: ___ Single ___Married ___Widowed ___Divorced

How much financial aid to you expect from
Your family? _____ Your church? _____
Personal work? _____ Spouse's work? _____

How many dependents do you have? _____

Family income: ___under \$10K ___\$10-15K ___15-20K ___20-25K ___over 25K

Are there any other scholarships, grants, or support you will be receiving from outside sources not listed? ___Yes ___No. If "yes" what are they?



Mid-South Christian College

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Memphis, TN 38118-3151
Tel. 901.375.4400
Fax 901.375.4085
E-mail: info@midsouthcc.org

MINISTRY-RELATED RECOGNITION:

Camper of the Week (High School): Year(s) _____
Camp _____

Bible Bowl: Team _____

___ Participant ___ Semi-finalist ___ National winner

Preaching Contests: ___ Participant ___ Regional winner

___ National runner-up ___ National winner

Other: _____

FOR USE BY SCHOLARSHIP COMMITTEE ONLY

Qualified scholarships:

Supplementary materials sent _____ returned _____

Scholarships approved: Name

Amount: _____ Date Paid: _____

Authorized Signatures:



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