MCM Christian Ministry Scholarship Application

NOTICE: Your scholarship funds will be disbursed only after confirmation of your enrollment as a full-time student has been received by our office.

Date of application:			
Academic year beginning next fall:			
I. GENERAL PROFILE			
Full Legal Name: (First, Middle, Last)		
Date of birth:			
Male or Female:			
Mailing address:			
Street:		<u></u>	
City:	State:	Zip Code:	
Permanent address if different fron	ı above:		
Street:			
City:	State:	Zip Code:	
Primary phone number: ()			
Texting allowed? (circle one) YES	or NO		
Current email address:			

II. EDUCATIONAL PROFILE

Have you previously completed any co	ollege certificates and/or	credits? If yes, please list.
What degree do you anticipate upon g	raduation from College	or University?
Projected graduation date from Colleg	e or University:	
What institution will you attend in the	coming academic year?	
School address:		
City:	State:	Zip Code:
III. RELIGIOUS PROFILE		
Are you a born-again Christian?		_
Current home church name:		
Pastor's name:		
Church Address:		
City:	State:	Zip Code:
Church phone number: ()		
Pastor phone number: ()		
IV. ANY NOTEWORTHY CLUBS, ACHIEVEMENTS, LEADERSHIP	· · · · · · · · · · · · · · · · · · ·	<i>'</i>

V. EMPLOYMENT
Employment anticipated during academic year. (circle one) YES or NO
Type of employment or Employer:
Estimated number of hours per week:
VI. FINANCIAL PROFILE
1.Total anticipated cost for initial year: \$
a. Tuition and fees: \$
b. Books: \$
c. Campus room and board: \$
d. Other (please describe): \$
 2. Total financial assistance received from other sources such as financial aid, grants, scholarships, etc. \$
VII. MINISTRY
Please tell us about yourself as a person and your ministry involvement (attach an additional
sheet if necessary):

Describe briefly your call to ministry and planned vocational direction and goals:				

VIII. PASTOR RECOMMENDATION AND REFERENCES

It is the responsibility of the applicant to ensure that one (1) Pastor recommendation and two (2) academic references are sent to the Board of MCM along with the completed application. Please give your referents a copy of the reference form. Ask them to be specific in the matter of potential for ministry, character, academic aptitude, and relational skills. For full consideration of your application, references are required from each of the following:

Spiritual Letter of Recommendation

1. A pastor of the congregation of which you are a member or currently participating.

Two Academic/Professional Letters of References

- 1. A High School Dean, Principal, Counselor or Teacher that knows you well.
- 2. Professional reference outside of your church and school that knows you well.

IX. TRANSCRIPTS

Please make arrangements for the Board of MCM to receive official transcripts from your high school current to the time of your application to MCM.

X. CERTIFICATION STATEMENT

I certify that all of the information reported on this application is correct, to the best of my knowledge. I agree that if I am awarded a scholarship from Micah Cornerstone Ministries, I will use the funds exclusively for the pursuit of my college or University degree. I also agree that, if I receive a scholarship, I will submit to Micah Cornerstone Ministries confirmation from the College or University that I have been accepted. Also, I understand that if I drop out of ministry studies, or I do not maintain full-time student status as outlined in the MCM CMS application, whether because of academic grades, attendance, or I no longer feel "called", or for any other reason not previously approved of from the Board of MCM, I will be expected to return the Scholarship in full to MCM within one (1) calendar year from date of withdrawal/removal for redistribution to another applicant/recipient. I understand that a notification of withdrawal must be sent to the Board of MCM within ninety (90) days of withdrawal date.

I understand and agree with the statement above in its entirety without any reservation.

(First, Middle, Last)	Full Printed Name:	
Full Signature: Date:	(First, Middle, Last)	
	Full Signature:	Date:

XI. EVALUATION

Your completed application packet will be considered with all other applicants by the Board of MCM. Each portion of the application is considered and assigned a numerical value.

In practice, the committee will assign 20 points to each area to have a potential score of 100 from this application.

The five areas reviewed are:

- 1) the general profile, education, religious affiliation, and employment history
- 2) financial need
- 3) applicants' statements and career goals
- 4) quality of references and that all three are received in time
- 5) quality of academic standing based on the transcript

A maximum score of up to 100 points will be possible on the 1000-word essay. Special attention is paid to whether or not the applicant covered all required areas completely, appropriately, and clearly.

This means that with the Application and the Essay an applicant can have a possible score of 200 points.

It is your responsibility to check with your referents to ensure the timely submission of their letters and to make sure references are received before March 1, 11:59:59 pm CST.

Any application that is not complete with all listed requirements will be considered ineligible for consideration and will be deleted or destroyed in its entirety.

XII. MEDIA RELEASE

I give permission for my <u>name</u> to be used for any publication or publicity via any med means that are deemed appropriate by the Board of MCM, et al. without any reservati without compensation of any kind to myself, relatives, or governances, now and at any the future.	on and
Applicant Signature:	
If you DO NOT want MCM to use your <u>photo</u> , please check the box below.	
\square I request that MCM <u>NOT</u> use my photo in any literature or promotional materials.	aterial.
XIII. ACKNOWLEDGEMENT	
By signing below, I acknowledge that all information supplied in these forms is true a complete to the best of my knowledge.	nd
And, I understand and agree with the statements above in their entirety without any correservation.	ondition or
Full Printed Name: (First, Middle, Last)	
Full Signature: Date:	

^{*}All Applications received after deadline will be declared ineligible.