



## SCHOLARSHIP APPLICATION

(To request an application, please contact [srpastor.bethlehemtacoma@gmail.com](mailto:srpastor.bethlehemtacoma@gmail.com))



**Bishop Michael Doss, President**

**Committee Members**

**Tacoma Ministerial Alliance Executive Board of Directors**

# Tacoma Ministerial Alliance

PO Box 111859  
Tacoma, Washington 98411

Name \_\_\_\_\_ Marital Status \_\_\_\_\_  
Address \_\_\_\_\_ Number in Family \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_  
Date \_\_\_\_\_ Phone number \_\_\_\_\_ GPA \_\_\_\_\_  
Email \_\_\_\_\_

1. Name of current school attending, or last school attended. \_\_\_\_\_
2. What College or Institution do you plan to attend? \_\_\_\_\_  
\_\_\_\_\_.
3. *What major field of study do you plan to pursue?* \_\_\_\_\_  
Why? \_\_\_\_\_
4. What church are you a member of? \_\_\_\_\_
5. What church activities are you involved in? \_\_\_\_\_  
\_\_\_\_\_
6. What is your Pastor's name and phone number. \_\_\_\_\_  
\_\_\_\_\_
7. How long have you been a member of your church? \_\_\_\_\_

## **CRITERIA**

1. \_\_\_ Must be a member by way of a TMA community affiliation or church in good standing.
2. \_\_\_ Submit a copy of grade point average (GPA), or a copy of the GED certificate. \_\_\_ Scholarship award is for a GPA of 2.5 or higher.
3. \_\_\_ **Application deadline is May 31, 2027.**
4. \_\_\_ Submit a letter of recommendation from a school counselor/teacher.
5. \_\_\_ Submit a letter of recommendation from your Pastor.
6. \_\_\_ Attach a 50-word Essay of your goals and aspirations and a photo.
7. \_\_\_ Submit a copy of the Acceptance Letter from the school you are attending.
8. Be a High School graduate or (GED) Equivalent attending a Vocational, Technical or College to obtain a certificate, degree completion.

RETURN APPLICATION TO:

**Tacoma Ministerial Alliance Scholarship Committee**  
**PO BOX 111859**  
**Tacoma WA 98411**  
**C/O Pastor C. Ivan Johnson**  
**ivan@greaterdestinytacoma.com**  
**253-203-8322**