



SCHOLARSHIP APPLICATION

(To request an application, please contact srpastor.bethlehemtacoma@gmail.com)



Bishop Dr. Lawrence White, President Tacoma Ministerial Alliance

Pastor Willie J. Mitchell Educational Scholarship Committee

Committee Members

Tacoma Ministerial Alliance Executive Board of Directors

Tacoma Ministerial Alliance

PO Box 111859 Tacoma, Washington 98411

Name	Marital Status
Address	
DatePhone number	GPA
Email	
1. Name of current school attending,	or last school attended.
2. What College or Institution do you	plan to attend?
	lan to pursue?
Why?	
4. What church are you a member of	?
5. What church activities are you invo	olved in?
6. What is your Pastor's name and ph	none number
7. How long have you been a membe	er of your church?
CRITERIA	
	affiliated church and Pastor must be in good standing average (GPA), or a copy of the GED certificate. To of 2.5 or higher.
	ILT end of May with a post mark bearing the date.
	ation from a school counselor/teacher.
5 Submit a letter of recommend	•
6 Attach a 50-word Essay of you	•
	ice Letter from the school you are attending.
	GED) Equivalent attending a Vocational,
recnnical 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 Will Mitchell