

SCHOLARSHIP OF EXCELLENCE APPLICATION

GOD PROVIDES PROGRAM

APPLICANT INFORMATION			
Applicant's Name			
Address			
City		State	_ Zip
Country			
Telephone:	_ Email _		
Preferred method of contact:			
☐ Telephone			

vvoula you lik	e to receive updates about events, our newsletter and free resources?	
П	Yes!	
_	No	
_		
Birth Date:	High School Name: (i	f
applicable) G	PA: (if applicable)	
_		
Higher Educa	tion Information	
Anticipated C	ollege/University:	_
Anticipated M	ajor:	_
Please include	e the following attachments:	
	Personal statement (not to exceed three pages) that includes a brief autobiography about yourself, your reasons for applying for the scholarship, your financial need, your proposed	
П	field of study, your future career plans, and your current activities and involvements. Most Recent Transcript (if applicable)	
	Driver's License or State Identification or University ID or Birth Certificate	
How to subm	it	
Please submit	at Rayofsunshineministry.org under Submit Application at the bottom of page or return the	
Please submit		
Please submit a	at Rayofsunshineministry.org under Submit Application at the bottom of page or return the	
Please submit a	at Rayofsunshineministry.org under Submit Application at the bottom of page or return the and attachments to:	
Please submit a completed form	at Rayofsunshineministry.org under Submit Application at the bottom of page or return the n and attachments to: n@rayofsunshineministry.org subject Scholarship of Excellence Application	
Please submit a completed form Ataliyation	at Rayofsunshineministry.org under Submit Application at the bottom of page or return the n and attachments to: n@rayofsunshineministry.org subject Scholarship of Excellence Application	
Please submit a completed form Ataliyation Mail to:	at Rayofsunshineministry.org under Submit Application at the bottom of page or return the n and attachments to: n@rayofsunshineministry.org subject Scholarship of Excellence Application	
Please submit a completed form Ataliyation Mail to: Ray of	at Rayofsunshineministry.org under Submit Application at the bottom of page or return the n and attachments to: n@rayofsunshineministry.org subject Scholarship of Excellence Application Sunshine Ministry	

DISCLAIMERS: FILLING OUT THIS APPLICATION DOES NOT GUARANTEE A SCHOLARSHIP. SCHOLARSHIPS ARE DISTRIBUTED AS FUNDS ALLOW AND AT THE DISCRETION OF BOARD MEMBERS. EVERY PERSON(S) WHO APPLY CERTIFY THE INFORMATION PROVIDED ON THE APPLICATION IS CORRECT TO THE BEST OF THEIR KNOWLEDGE. FALSIFICATION OF INFORMATION WILL AUTOMATICALLY DISQUALIFY ANY PERSON(S) FROM RECEIVING ANY ASSISTANCE. THE ORGANIZATION AGREES THAT IF AWARDED A SCHOLARSHIP, RAY OF SUNSHINE MINISTRY INC MAY SHARE THEIR SCHOLARSHIP INFORMATION WITH THE LOCAL MEDIA, TELEVISION, RADIO AND/OR THE RAY OF SUNSHINE MINISTRY'S WEBSITE OR SOCIAL MEDIA OR THE SOCIAL MEDIA AND/OR WEBSITES OF BOARD MEMBERS. RAY OF SUNSHINE MINISTRY INC PROHIBITS DISCRIMINATION AND HARASSMENT AND PROVIDES EQUAL OPPORTUNITY IN ITS ADMISSIONS, EDUCATIONAL PROGRAMS, ACTIVITIES AND EMPLOYMENT. THIS IS THE CASE REGARDLESS OF RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL STATUS, SEXUAL ORIENTATION, POLITICAL AFFILIATION, VETERAN STATUS AND DISABILITIES THAT INCLUDE HIV AND AIDS AND MEDICAL CONDITIONS. AN INDIVIDUAL CAN RECEIVE A SCHOLARSHIP ONLY ONCE A YEAR. IF THE FUNDS ARE DISTRIBUTED TO THE PERSON DIRECTLY AND THEY DO NOT PROVIDE A RECEIPT PROVING IT WAS USED FOR THE INTENDED PURPOSE WITHIN 3 MONTHS, THEY WILL BE DISQUALIFIED FROM USING THIS PUBLIC SERVICE AGAIN.