



Scholarship Application
Sister Ethel Mae Ross and Pastor Ellean Wiggins
NDC Missionary & Christian Women's Auxiliary

Name: _____ Male Female

Street Address _____

City _____ State _____ Zip _____

Phone: _____ Home Mobile

Email: _____

Name of Parent / Sponsor _____

Contact Number & Email _____

Spiritual Personal Information

Number of Years Saved: _____

Church Activities: _____

Church Affiliation

Home Church: _____

Pastor _____

Church Address _____

City _____ State _____ Zip _____

Phone: Email: _____

Educational Information

Accredited college, university or trade school where you are registered or attend. Please submit documentation of registration and/or acceptance letter. Submit documentation on official school letterhead with registrar's signature.

Name of School _____

School Address: _____

Enrollment Date _____ Course of Study _____

Expected Date of Graduation _____

Employment Information (if applicable)

Name of Employer _____

Address _____

City _____ State _____ Zip _____

Phone: Email: _____

Position Title _____

Briefly describe job responsibilities _____

List scholastic awards, honors or recognitions _____

- Please submit the Pastor's Evaluation Form with your application
- Please submit two (2) reference letters from non-Family members
- **Submit grades or transcripts with your application**
- **Please submit a photo of applicant**

Your application, photo and reference letters must be received or postmarked no later than May 30, 2026.

The documents may be emailed to Evangelist Beverly Williams at bevawms.baw@gmail.com or may be sent via U.S. Postal Service mail to:

Evangelist Beverly Williams
20315 Mansfield
Detroit, Michigan 48235