## NORTH AMERICAN DIVISION APPLICATION

## WOMEN'S MINISTRIES SCHOLARSHIP FUND



#### INSTRUCTIONS TO THE APPLICANT:

Scholarship awards are based on academic achievement, financial need, and community outreach. Specific amounts of scholarship awards vary from year to year and are dependent on the amount of funds available. **Scholarships may be obtained** *only* **through your home division** (*the division in which you normally reside and where you hold citizenship*). Students from outside the North American Division who have a *green card* may be processed in NAD. Those who have *student visas* must apply for scholarship in their home division.

#### 1. **COMPLETING YOUR APPLICATION:**

- Answer each question completely.
- The completed application must be in English.

### 2. FINANCIAL INFORMATION SHEET:

• Fill out the Financial Information Sheet in its entirety. The more you show your financial need, the better your chances of receiving a scholarship. Your application will not be accepted without the financial information sheet.

#### 3. REFERENCE FORMS:

 You must have three references from individuals who are not related to you. They should be from someone representing your school, someone representing your church, or someone you have worked for.

Give each of your three references a Reference Form and ask them to send it to the union Women's Ministries director of the union where your college of choice is located (see next page). (Be sure to type the union director's name and address at the bottom of page two of each Reference Form.)

#### 4. TRANSCRIPTS:

- You must obtain your official transcript from the most recent school you have attended to include with your application.
- You must have a GPA of at least 3.0.

#### 5. MAILING YOUR APPLICATION:

- After school has started, mail your completed application (including transcripts and Financial Information Sheet) to the union Women's Ministries director in the union in which you will be attending school (see list on next page) before October 15.
- 6. **SCHOLARSHIPS ARE AWARDED:** Second semester of the current school year.

### Union Women's Ministries Directors

## For **Andrews University**, send application to:

Women's Ministries Lake Union Conference of Seventh-day Adventists P.O. Box 287 Berrien Springs, MI 49103 269-473-8247 269-473-8209 (fax)

## For **Atlantic Union College**, send application to:

Yvonne Knight, Director
Women's Ministries
Atlantic Union Conference of Seventh-day Adventists
400 Main Street
P O Box 1189
South Lancaster, MA 01561
vonnieek@aol.com

## For **Burman University**, send application to:

Brenda Rowe, Director 22 Rue Hazelwood Dollard-Des-Ormeaux, QC H9A 2N6 Canada brendarowe@johnabbott.qc.ca

## For Washington Adventist University or Kettering College of Medical Arts,

send application to: Tamyra Horst

720 Museum Rd. Reading, PA 19611

610-374-8331 ext 236

thorst@paconference.org

## For La Sierra University Loma Linda University Pacific Union College,

send application to:
Dorothy Means
4650 Sepulveda Blvd. #106
Sherman Oaks, CA 91403
818-990-9786
805-495-2644 (Conf. fax)
dot.mns@sbcglobal.net

## For Oakwood University Southern Adventist University Florida Hospital College,

send application to:
Yolanda Smith
302 Research Drive
Norcross, GA 30092
301-992-2136
ysmith@southernunion.com

## For **Southwestern Adventist University**, send application to:

Carmen F. Griffith 400 Rock Meadow Tr. Mansfield, TX 76063 817-721-8906 cgriffith@swuc.org

## For **Union College**, send application to:

Nancy Buxton 5030 Eagle Ridge Road Lincoln, NE 68516 402-328-0042 (phone & fax) nancybee47@yahoo.com

## For Walla Walla University, send application to:

Sue Patzer 5709 N. 20<sup>th</sup> St Ridgefield, WA 98642 360-857-7031 360-857-7131 (fax) sue.patzer@nw.npuc.org

## NORTH AMERICAN DIVISION SCHOLARSHIP APPLICATION

Send this completed application with your most recent transcript and the financial information sheet to the union Women's Ministries director before October 15. If you need extra space to answer any question, write on a separate sheet of paper.

| 1.  | Family Name  | First Name   | Middle Name   | Phone |
|-----|--|--|---|-------|
| 2.  | Address  |  |   |       |
|     | E-mail   |  |   |       |
| 3.  | Citizenship  | 4a. Count  | ry of Residence   |       |
| 4b. | . If not citizen of US, Canada, of green card student visa | or Bermuda, what kind of<br>other (please specify) | visa do you have? (check one)                                     |       |
| 5.  | Home Church (Church name                                   | e, city, state, website addre                      | ess)  |       |
| 6.  | Conference   | 7. Date of Bapti                                   | sm  |       |
| 8.  | Birth date   | 9. Marital Statı                                   | us  |       |
| 10. | Your major area of study                                   |  |   |       |
| 11. | Name of Adventist School yo                                | u are currently enrolled in                        |   |       |
| 12. | Are you a part-time or fo                                  | ull-time student? No. 0                            | Credit hrs. enrolled this year: _                                 |       |
| 13. | Classification: Freshman                                   | Sophomore Junior                                   | Senior  |       |
| 14. | List your college education<br>School and City             | to date. Start with your I                         | <i>most recent</i> education, and lis<br>From <i>(month/year)</i> |       |
|     |  |  |   |       |
|     |  |  |   |       |

15. Why did you choose this area of study and how do you plan to use it to achieve your goals?

| 16. | How many years of full-time sci  | hool work do you need to graduate?                      |                              |  |  |
|-----|--|---|------------------------------|--|--|
| 17. | List your work experience. Start with your <i>most recent</i> job and list in order. |   |                              |  |  |
|     | Type of work   | Name/Address of Employer                                | From (mo/yr) To (mo/yr)      |  |  |
|     |  |   |                              |  |  |
| 18. | Please share your conversion e meaningful experience in your                         | xperience and tell why you feel it was an impo<br>life. | rtant or                     |  |  |
| 19. | What or who has influenced yo  | u most in your life? Why?                               |                              |  |  |
| 20. | Have you received any special l  | nonors, recognition or awards? Please list:             |                              |  |  |
| 21. | List any programs or projects in what leadership roles you had:  a) in your church   | n which you have been involved; please tell <u>hov</u>  | <u>v</u> you participated or |  |  |
|     | b) in school   |   |                              |  |  |

| c) in | n the community   |
|-------|---|
|       | your special talents, interests, and hobbies (such as bilingual abilities, musical talents, public aking, writing, etc.):   |
|       |   |
|       |   |
| lars  | , agree to the following conditions for acceptance of a hip from the North American Division Women's Ministries Scholarship Fund to attend (school) for the school year |
|       | Scholarship Agreement   |
| 1.    | I promise to uphold the beliefs of the Seventh-day Adventist Church through my speech and behavior, and to work for the soon coming of Christ.                          |
| 2.    | I will maintain a grade-point average of at least 3.0.  |
| 3.    | I promise to seek opportunities to serve God and humanity in my church and school.  |
| 4.    | I will provide a written report of my school progress and church related activities to the North American Division Women's Ministries Director.                         |
| 5.    | I understand that this scholarship will not cover all my tuition needs. It is not a loan.   |
| 6.    | I understand that there is no guarantee of church employment upon completion of my education.   |
|       |   |
|       | I, lars   |

## FINANCIAL INFORMATION SHEET North American Division Women's Ministries

| Note:   | This form must be filled out   | complete       | ely.                                 |                             |                     |
|---------|--|----------------|--------------------------------------|-----------------------------|---------------------|
| 1.      | Name:  |                |                                      |                             |                     |
| 2.      | List annual income:  | * <u>P</u>     | ersonal income:                      | **Family incon              | ne:                 |
| financi | *This includes: alimony rece<br>ial support for housing, vehicle<br>**This includes: parents or, | e, tuition     | etc., monetary gifts f               | from family, church, etc.   | school year,        |
| 3.      | List amount of financial help grants or scholarships):   | receive        | d from family and/or                 | sponsors (not counting      |                     |
| 4.      | If married, is your husband  | employe        | d full-time? Yes                     | No                          |                     |
| 5.      | How many dependents do <b>y</b>  | <b>ou</b> have | besides yourself?                    | Relationship to you         | _                   |
| 6.      | If single, list number of sibli  | ngs curre      | ently enrolled in SDA                | /private school K-16:       |                     |
| 7.      | Average number of <b>your</b> wo   | ork hours      | per week in the last                 | six months:                 | _                   |
| 8.      | Number of hours you will be  | e workin       | g <b>weekly</b> during the s         | school year:                | _                   |
| 9.      | If not working, why not?   |                |                                      |                             |                     |
| 10.     | Did you receive financial aid  |                | e <b>employer</b> of your p<br>much? | , -                         | ?                   |
| 11.     | FINANCIAL AID: List ALL fi   | nancial a      | id received for your                 | college or graduate studies | S:                  |
|         | Gifts/Grants and Scholars  | <u>hips</u>    |                                      | Student Loans               |                     |
| Source  | <u>An</u>  | <u>nount</u>   | <u>Source</u>                        |                             | <u>Amount</u>       |
|         |  |                |                                      |                             |                     |
|         |  |                |                                      |                             |                     |
|         |  |                |                                      |                             |                     |
|         |  |                |                                      |                             |                     |
| 12.     | What is the total balance of   | all stude      | nt loans you have rec                | eived during your college   | or graduate studies |
| 13.     | How does this break down i   | n curren       | t monthly payments?                  |                             |                     |
|         | \$ per month until   |                |                                      | til graduation              |                     |
| 14      | ADDITIONAL COMMENTS:   |                |                                      |                             |                     |

4. How well does she work with others?

## NORTH AMERICAN DIVISION WOMEN'S MINISTRIES SCHOLARSHIP PROGRAM

REFERENCE FORM 1: SCHOOL

Must be filled out in English
(First three lines to be filled out by applicant)

| Na  | me of Applicant  |  |  |  |
|---|--|--|--|--|
| Name of Union Women's Ministries Director |  |  |  |  |
| Ad  | Address where application should be sent   |  |  |  |
|   | ase give your opinion about the person who is applying for a scholarship. Please look at her individua<br>ents and give specific examples where possible. We would like to know: |  |  |  |
| 1.  | How long have you known this person, and in what capacity?   |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| 2.  | How well does she apply herself to her work and/or studies?  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| 3.  | What contribution has she made in school, work and/or church?  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |

| 5. What are her strengths, assets, and skills? Please comment on her potential leadership abilities. |
|--|
| 6. What concerns (if any) do you have regarding her ability to succeed?                              |
| 7. What would be your overall evaluation of her that causes her to stand out in your mind?           |
| Your Name: (Please Print):<br>Home Address:<br>Email:  |
| Home Phone:  Job Title:  Employer:  Employer's Address:  |
| Signature Date   |

This reference form should be sent directly to the Union Women's Ministries Director at the address given above. DO NOT send it back to the applicant.

4. How well does she work with others?

# NORTH AMERICAN DIVISION WOMEN'S MINISTRIES SCHOLARSHIP PROGRAM

## REFERENCE FORM 2: CHURCH

Must be filled out in English (First three lines to be filled out by applicant)

| Name of Applicant   |   |  |
|---|---|--|
| Name of Union Women's Ministries Director  Address where application should be sent |   |  |
|   |   |  |
| 1.  | How long have you known this person, and in what capacity?    |  |
|   |   |  |
|   |   |  |
| 2.  | How well does she apply herself to her work and/or studies?   |  |
|   |   |  |
|   |   |  |
| 3.  | What contribution has she made in school, work and/or church? |  |
|   |   |  |
|   |   |  |

| 5. What are her strengths, assets, and skills? Please comment on her potential leadership abilities. |
|--|
| 6. What concerns (if any) do you have regarding her ability to succeed?                              |
| 7. What would be your overall evaluation of her that causes her to stand out in your mind?           |
| Your Name: (Please Print):   |
| Home Address:  |
| Email:   |
| Home Phone:  |
| Job Title:   |
| Employer:  |
| Employer's Address:  |
|  |
| Signature Date   |

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## NORTH AMERICAN DIVISION WOMEN'S MINISTRIES SCHOLARSHIP PROGRAM

REFERENCE FORM 3: OTHER (NOT FAMILY/FRIEND)

Must be filled out in English

(First three lines to be filled out by applicant)

| Name of Union Women's Ministries Director  Address where application should be sent  Please give your opinion about the person who is applying for a scholarship. Please look at her talents and give specific examples where possible. We would like to know:  1. How long have you known this person, and in what capacity? |             |
|---|-------------|
| Address where application should be sent  |             |
| talents and give specific examples where possible. We would like to know:   |             |
| 1. How long have you known this person, and in what canacity?   | ·individual |
|   |             |
|   |             |
|   |             |
| 2. How well does she apply herself to her work and/or studies?  |             |
|   |             |
|   |             |
| 3. What contribution has she made in school, work and/or church?  |             |
|   |             |
| 4. How well does she work with others?  |             |

| 5. What are her strengths, assets, and skills? Please comment on her potential leadership abilities. |
|--|
| 6. What concerns (if any) do you have regarding her ability to succeed?                              |
| 7. What would be your overall evaluation of her that causes her to stand out in your mind?           |
| Your Name: (Please Print):Home Address:Email:  |
| Home Phone:  Job Title:  Employer:  Employer's Address:  |
| Signature Date   |

This reference form should be sent directly to the Union Women's Ministries Director at the address given above. DO NOT send it back to the applicant.