NORTH AMERICAN DIVISION APPLICATION PACKET for the General Conference of Seventh-day Adventists 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.

(Definition of home division: The division in which you normally reside and where you hold citizenship. Students from outside 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.
- Please type it, if possible.

2. FINANCIAL INFORMATION SHEET:

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

3. **RECOMMENDATION FORMS**:

• You must have <u>3 recommendations in **English**</u>. If possible, they should be from someone representing your school, someone representing your church, and someone you have worked for or under.

<u>Give each of your three reference names a Recommendation Form and ask them to send it to</u> 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 2 of each Recommendation Form.)

4. TRANSCRIPTS:

- You must obtain your official transcript from the most recent school you have attended to include with your application.
- Send the GPA (Grade Point Average) translated to American system (An A, B, or C grading system is acceptable.) Must be in English.

5. MAILING YOUR APPLICATION:

- <u>After school has started</u>, mail your completed application (including transcripts and Financial <u>Information Sheet</u>) to the union Women's Ministries director in the union in which you will be attending school (see list on next page) before **September 30**.
- 6. SCHOLARSHIPS ARE AWARDED: Second Semester of the current school year.

UNION CONFERENCE WOMEN'S MINISTRIES DIRECTORS OF THE NORTH AMERICAN DIVISION

For Andrews University, send application to: Janell Hurst, Director Women's Ministries Lake Union Conference of Seventh-day Adventists c/o 10894 Balfour Dr. Noblesville, IN 46060 269-473-8249 269-473-8209 (fax) janghurst@yahoo.com

For Atlantic Union College, send application to: Charlotte L. V. Thoms 150 Viennawood Drive Rochester NY 14618-4420 585-329-9295 (phone) 585-475-7900 (fax) cthoms513@hotmail.com

For **Canadian University College**, send application to: Lynetta Murdoch North American Division of Seventh-day Adventists 12501 Old Columbia Pike Silver Spring, MD 20904-6600 301-680-6427 (w) 301-680-6464 (fax) Lynetta.murdoch@nad.adventist.org

For Washington Adventist University or Kettering College of Medical Arts,

send application to: Shirley Benton 812 Riva Ridge Blvd. Gahanna, OH 43230-1804 614-775-9540 614-693-2432 (fax) srbenton2@aol.com

For La Sierra University, Loma Linda University, or 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, or Florida Hospital College, send application to: Laura Smith 106 Elm Drive Montgomery, AL 36117 334-272-5417 (phone & fax) benlausm@aol.com

For Southwestern Adventist University, send application to:

Carmen F. Griffith 400 Rock Meadow Tr. Mansfield, TX 76063 817-721-8906 <u>carmengriffith4748@yahoo.com</u>

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

North American Division WOMEN'S MINISTRIES GENERAL CONFERENCE SCHOLARSHIP APPLICATION

(Please Type or PRINT your answers)

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

,	First Name	Middle Name	 Phone
۵ddress			
Addi C33			
E-mail			
Citizenship	4a. (Country of Residence	
			(check one)
Home Church (Churc	h name, city, state, webs	ite address)	
Conference		_ 7. Date of Baptism	
Birth date	9. Marita	l Status	
What is your major a	area of study?		
Name of Adventist So	hool you plan to enroll or	you are currently attending?	
Are you a part-time	or full-time stud	ent? No. Credit hrs enrolled	this year:
Classification:	_ Freshman Sophome	oreJunior Senior	Graduate student
List your college edu	cation to date. Start wit	h your most recent educatio	on, and list in order.
School and City		From Date	(month/year) To
	If not citizen of US, o green card Home Church (Church Conference Birth date What is your major a Name of Adventist Sc Are you a part-time Classification:	If not citizen of US, Canada, or Bermuda, what green cardstudent visaot Home Church (Church name, city, state, webs Conference Birth date9. Marita What is your major area of study? Name of Adventist School you plan to enroll or y Are you a part-time or full-time stud Classification: Freshman Sophomod List your college education to date. Start wit	Citizenship

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	e school 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 Date (mo./yr.)To

18. Please share your conversion experience and tell why you feel it was an important or meaningful experience in your life.

19. What or who has influenced you most in your life? Why?

20. Have you received any special honors, recognition or awards? Please list:

- 21. List any programs or projects in which you have been involved; please tell how you participated or what leadership roles you had:
 - a) in your church
 - b) in school
 - c) in the community
- 22. List your special talents, interests, and hobbies (such as bilingual abilities, musical talents, public speaking, writing, etc.):

_____, agree to the following conditions for 23. l, _____ acceptance of a scholarship from the General Conference Women's Ministries Scholarship Fund to attend (school) ______ for the school year ______.

24. I, ______, give my permission to General Conference Women's Ministries to use my picture and my name in the "Scholarshipping Our Sisters" Newsletter or fundraising program.

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 2.5.
- 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.

Signed _____ Date _____

FINANCIAL INFORMATION SHEET North American Division Women's Ministries

Note: This form must be filled out completely.

1.	Name:				
2.	List annual income:	Personal in	ncome:	Family income:	
		Less th \$20,00 \$35,00 \$50,00	0-50,000	Less than \$20,0 \$20,000-35,000 \$35,000-50,000 \$50,000-65,000	
3.	List amount of financial help received from family and/or sponsors (not counting grants or scholarships):				
4.	If married, is your husband employed full-time? Yes No				
5.	How many dependents do	you have bes	des yourself?		
6.	If single, list number of sibli	ngs currently	enrolled in SD	A /private school K-16: _	
7.	Average number of your work hours per week in the last six months:				
8.	Number of hours you will be working weekly during the school year:				
9.	If not working, why not?				
10.	Did you receive financial aid from the employer of your parent/guardian/husband? YesNo If Yes, how much?			id?	
11.	FINANCIAL AID: List all fin	nancial aid red	eived in the la	ast two years:	
	Gifts/Grants and Scholars	<u>ships</u>		Student Loans	
Source	<u>e</u>	<u>Amount</u>	Source		<u>Amount</u>
11.	What is the present balance of your student loan debt, if any?				
12.	How does this break down in current monthly payments?				
	<pre>\$ per month until _</pre>		OR No	payment until graduatior	۱
13.	ADDITIONAL COMMENTS	S: Please use	the space be	low for additional comme	nts about you

financial need as it pertains to this scholarship. (*This information is extremely important. The more information you give, the more seriously your application will be considered.*)

GENERAL CONFERENCE OF SEVENTH-DAY ADVENTISTS WOMEN'S MINISTRIES SCHOLARSHIP PROGRAM

RECOMMENDATION FORM

Must be filled out in English

Name of Applicant _____

Address _____

Please give your opinion about the person who is applying for a scholarship. Please look at her individual talents 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?

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:	
HomePhone:	
Job Title:	
Employer:	
Employer's Address:	
Signature	Date

PLEASE SEND THIS RECOMMENDATION FORM DIRECTLY TO THE WOMEN'S MINISTRIES DIRECTOR LISTED BELOW.

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Your Name: (Please Print):		
Home Address:		
Signature	Date	
PLEASE SEND THIS RECOMMENDATION FORM DIRECTLY TO THE		

WOMEN'S MINISTRIES DIRECTOR LISTED BELOW.

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Your Name: (Please Print):	
Home Address:	
Signature	Date
PLEASE SEND THIS RECOMME	

WOMEN'S MINISTRIES DIRECTOR LISTED BELOW: