

# GENERAL CONFERENCE OF SEVENTH-DAY ADVENTISTS

## WOMEN'S MINISTRIES SCHOLARSHIP APPLICATION PACKET



*"A Ministry for every Woman"  
Touch a Heart, Tell the World.*

### 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 funds available in your division. 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.)*

#### 1. COMPLETING YOUR APPLICATION:

- Answer each question completely.
- The completed application must be in English.
- Send it to your conference Women's Ministries director before the deadline date. If you have no conference WM director send the application to your union WM director. If there is no conference or union WM director then send it directly to your division WM director.
- Please type it, if possible.
- Be sure to include a photograph in passport size (2x2)

#### 2. RECOMMENDATION FORMS:

- You must have 3 recommendations in English. If possible, one each from someone representing your school, someone representing your church, and someone you have worked for or under.
- Give a recommendation form to each of the three persons you have asked. Have them fill out the form and send it directly to your division WM director.

#### 3. TRANSCRIPTS:

- You must obtain your most recent transcripts from the schools you have attended to include with your application.
- Send the GPA (Grade Point Average) translated to American system.

#### 4. FINANCIAL NEED:

- On a separate sheet of paper, write an additional paragraph regarding your financial need as it pertains to your scholarship request. (See question 24). Your application will not be accepted without it.

#### 5. MAILING YOUR APPLICATION:

- Mail your completed application (including photograph, transcripts and financial need information) to your conference Women's Ministries director before the deadline date. If you have no conference WM director send the application to your union WM director. If there is no conference or union WM director, then send it directly to your division WM director.

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WOMEN'S MINISTRIES SCHOLARSHIP APPLICATION



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(Please Type or PRINT your answers)

- Send this completed application with your most recent transcripts, a recent photograph of yourself, and a paragraph describing your financial need to your conference Women's Ministries director before the deadline date. If you have no conference WM director send the application to your union WM director. If there is no conference or union WM director then send it directly to your division WM director. **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 \_\_\_\_\_ 4. Country of Residence \_\_\_\_\_

5. Home Church Location \_\_\_\_\_

6. Conference \_\_\_\_\_ 7. Date of Baptism \_\_\_\_\_

8. Birth date \_\_\_\_\_ 9. Marital Status \_\_\_\_\_

10. Do you have any dependents? \_\_\_\_\_

11. What is your major area of study? \_\_\_\_\_

12. Name of Adventist School you plan to enroll in or you are currently attending? \_\_\_\_\_  
\_\_\_\_\_

13. Are you a part-time or full-time student? \_\_\_\_\_

14. Are you receiving any other scholarship or assistance for your studies? \_\_\_\_\_

15. List your college level education to date. Start with your most recent education, and list in order.

| School and City | From Date (month/year) To |
|-----------------|---------------------------|
| _____           | _____                     |
| _____           | _____                     |
| _____           | _____                     |

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

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17. How many years of full-time school work do you need to graduate? \_\_\_\_\_

18. List your work experience. Start with your most recent job and list in order.

| Type of work | Name/Address of Employer | From Date (month/year)To |
|--------------|--------------------------|--------------------------|
| _____        | _____                    | _____                    |
| _____        | _____                    | _____                    |
| _____        | _____                    | _____                    |
| _____        | _____                    | _____                    |

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

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

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

22. 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

23. List your special talents, interests, and hobbies (such as bilingual abilities, musical talents, public speaking, writing, etc.):

24. Please write a paragraph, or more, in which you describe your financial need. Please include information as to what expenses you face, your resources to cover these expenses, who else is helping you and to what extent, if anyone is dependent on you for financial support, and what difference receiving a Women's Ministries Scholarship will make in your academic decisions and future. Please be specific, including all debts and resources. **Use a blank sheet of paper for this and make sure you write your name legibly at the top.**

**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 my Division Women's Ministries Director.
5. I understand that this scholarship may 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 \_\_\_\_\_

**Scholarships must be applied for study in your home division only.**

- **Scholarship applications are to be sent to your conference Women's Ministries director before the deadline date. If you have no conference WM director send the application to your union WM director. If there is no conference or union WM director, then send it directly to your division WM director.**

\*Give each of your three references a recommendation form to mail to the WM director

25. I, \_\_\_\_\_ agree to the following conditions for acceptance of a scholarship from the General Conference Women's Ministries Scholarship Fund to attend (school)\_\_\_\_\_ for the school year\_\_\_\_\_.

26. I, \_\_\_\_\_ give my permission to General Conference Women's Ministries to use my picture and my name in the "Scholarshipping Our Sisters" Newsletter or as part of a fundraising program.

\_\_\_\_\_  
Applicant Signature

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

**RECOMMENDATION FORM**

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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Home Address: \_\_\_\_\_

E-mail \_\_\_\_\_

Home Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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E-mail \_\_\_\_\_

Home Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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