



# CHRISTIAN COLLEGE SCHOLARSHIP APPLICATION

Please return completed form to the office to the attention of the Church Treasurer.

Today's Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

College Name: \_\_\_\_\_

College Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

How long have you been a faithful part of Tri-State Fellowship? \_\_\_\_\_

Are you a member of Tri-State Fellowship?      Yes      No

When did you become a member? \_\_\_\_\_

What is your planned educational major? \_\_\_\_\_

If in graduate school, what is your planned ministry career? \_\_\_\_\_

Year in College (Circle upcoming school year)

Freshman      Sophomore      Junior      Senior

Year in Master's Work (Circle upcoming school year)

First      Second      Third      Fourth      Other \_\_\_\_\_

What is your grade point average during this current school year? (Minimum requirement is 2.0 on a scale of 4.0.)

\_\_\_\_\_

What are your career goals?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provide a brief overview of your spiritual journey.

If more space is needed, you may write on the back of this form or use another sheet of paper.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_