

MICHIGAN DISTRICT STUDENT OF THE YEAR BETHEL SCHOLARSHIP

The Missionary Church Michigan District **STUDENT APPLICATION**

<u>OFFICE USE ONLY:</u>	<u>DATE RECEIVED:</u>
<input type="checkbox"/> Student's application	___/___/___
<input type="checkbox"/> Pastor's reference	___/___/___
<input type="checkbox"/> Youth Sponsor's reference	___/___/___
<input type="checkbox"/> Teacher's reference	___/___/___
<input type="checkbox"/> Copy of school grades	___/___/___
<input type="checkbox"/> Bethel acceptance	___/___/___

Please
Attach
A
Recent
Photo
Here

PART ONE: PERSONAL INFORMATION

NAME _____
(last) (first) (middle initial)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ E-MAIL ADDRESS: _____

BIRTHDATE _____ AGE _____

FATHER'S NAME _____ MOTHER'S NAME _____

ADDRESS (If different than above) _____

NAMES AND AGES OF SIBLINGS:

- 1.
- 2.
- 3.

PLEASE LIST PERSONAL INTERESTS AND HOBBIES:

DO YOU WORK OUTSIDE THE HOME? _____ IF SO, PLEASE DESCRIBE YOUR JOB (where you work; what you do; how many hours per work; etc.):

PART TWO: SCHOOL INFORMATION

SCHOOL NAME _____ CITY _____ GRADE _____

CURRENT HIGH SCHOOL GRADE POINT AVERAGE (G.P.A.): _____
Please attach a photocopy of your current high school transcript or grade card

GRADUATION DATE _____

HAVE YOU BEEN ACCEPTED TO BETHEL COLLEGE? _____ DATE NOTIFIED BY BETHEL _____

WHAT IS YOUR INTENDED MAJOR IN COLLEGE? _____

PLEASE LIST ACADEMIC HONORS AND/OR AWARDS RECEIVED:

PLEASE LIST HIGH SCHOOL EXTRA-CURRICULAR ACTIVITIES:

PART THREE: CHURCH/ SPIRITUAL LIFE

CHURCH NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____ PASTOR'S NAME _____

HAVE YOU ACCEPTED JESUS CHRIST AS YOUR PERSONAL SAVIOR? _____ Please use back side of this form to write out your testimony. Include when you first accepted Christ into your life, how you know you are a Christian, and how the Lord is presently at work in your life.

WHAT IS YOUR FAVORITE BIBLE VERSE? _____ WHY? _____

DO YOU MAINTAIN A REGULAR PRAYER/ DEVOTIONAL TIME? _____ PLEASE DESCRIBE: _____

WHEN DID YOU BECOME A MEMBER OF THE ABOVE LISTED CHURCH? _____

PLEASE LIST AREAS OF INVOLVEMENT AND MINISTRY IN YOUR CHURCH:

PLEASE LIST AREAS OF INVOLVEMENT IN DISTRICT YOUTH MINISTRIES:

PART FOUR: REFERENCES

Please fill in names of persons who are not related to you. If your father is the pastor, have some other pastor who knows you well fill out that reference. Your references should know you well enough to be objective. Be sure to request their permission to use their name as a reference. Please give each individual the appropriate reference form for them to complete and a stamp addressed envelop to return the form to the District Office.

1. PASTOR: _____
(Name)

(Address) (City/State/Zip) ()
(Phone)

2. YOUTH PASTOR _____
(Name)

(Address) (City/State/Zip) ()
(Phone)

3. TEACHER _____
(Name)

(Address) (City/State/Zip) ()
(Phone)

PART FIVE: SIGNATURES

1. APPLICANT

I have completed the above application for the Missionary Church Michigan District Student of the Year Bethel College Scholarship Award and ascertain the information given to be true and accurate. I have been accepted as an incoming freshman student to Bethel College for the Fall Semester. If needed, I, along with one of my parents, am available for an interview by the selection committee. Should I be selected to receive this award, I agree to be present during the Youth Service the second Friday night of Brown City Family Camp in August when public recognition of the award is given.

Signed: _____ Date ___ / ___ / ___

2. PARENT

We, the parents of _____, have reviewed our child's application for this scholarship, and ascertain the information given to be true and accurate. If needed, one or both of us are available for an interview by the selection committee.

Signed: _____ Date ___ / ___ / ___

DEADLINE - APRIL 1

Return completed forms and all references to:

*Missionary Church Michigan District
Bethel Scholarship
1091 Creekwood Trail
Burton, MI 48509*

