

NAME \_\_\_\_\_

## Scholarship for 2020-2021

Name of Seminary Attending \_\_\_\_\_

New \_\_\_\_\_

Please type or print

Renewal \_\_\_\_\_

Black ink only

Expected Seminary Graduation Date \_\_\_\_\_

# SCHOLARSHIP APPLICATION FOR SEMINARY

***Scholarships shall be granted to applicants seeking a degree or a ministry choice with the following goals: To do mission work or to enhance and promote missions education directly. Stated goals of the applicant shall be considered by the Scholarship Committee in approving the application.***

Woman's Missionary Union  
Louisiana Baptist Convention  
PO Box 311  
Alexandria, LA 71309

***This scholarship is only for women pursuing a Masters degree at one of the six Southern Baptist Seminaries.***

### **Scholarship recipients are expected to:**

- Be devoted to the Lord, His church and work
- Be loyal to and participate in Women's Missionary Union and be actively involved in missions education of the church or on campus
- Include at least one missions course in degree program
- Be a FULL TIME, on-campus student (9 main campus, classroom hours)
- Maintain a 2.5 cumulative GPA
- Graduate of a Louisiana high school and/or a long-term Louisiana resident
- An active member in a Southern Baptist Church
- Be pursuing a Master's level graduate degree

- Applications are available from September 1 – May 20.
- Scholarship is in the amount of \$1600 (\$800 per semester).
- Completed applications should be mailed to the State WMU office and should be postmarked no later than May 25.
- SCHOLARSHIP RECIPIENTS MUST RE-APPLY EACH YEAR!

## PERSONAL DATA

### Applicant's Name

\_\_\_\_\_  
Last First Middle

Age \_\_\_\_\_ Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security Number \_\_\_\_\_

#### Marital Status:

Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widowed \_\_\_\_\_ No. of Children \_\_\_\_\_

---

### Permanent Mailing Address

\_\_\_\_\_  
Street City State/Zip Phone

#### Mailing Address while in School:

\_\_\_\_\_  
Street or PO Box City State/Zip Phone

Email Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Personal Income \_\_\_\_\_

Spouse's Occupation \_\_\_\_\_ Family Income (if married) \_\_\_\_\_

Is Spouse currently enrolled in seminary? \_\_\_\_ YES \_\_\_\_ NO

If so, list degree program and anticipated graduation date \_\_\_\_\_

## SCHOLASTIC DATA

High School Graduate \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
High School Name/Location \_\_\_\_\_ Graduation Date \_\_\_\_\_

College(s) Attended \_\_\_\_\_  
\_\_\_\_\_ Graduation Date \_\_\_\_\_

Degree(s) Earned \_\_\_\_\_ Cumulative College GPA \_\_\_\_\_

Applied for entrance to seminary \_\_\_\_ Yes \_\_\_\_ No Application approved by seminary \_\_\_\_ Yes \_\_\_\_ No

Are you already attending seminary? \_\_\_\_ Yes \_\_\_\_ No Where \_\_\_\_\_

Years/Semesters Completed \_\_\_\_\_ Cumulative Seminary GPA \_\_\_\_\_

Degree pursued \_\_\_\_\_ Emphasis \_\_\_\_\_

Mission classes taken this past year at seminary \_\_\_\_\_

---

## RELIGIOUS EXPERIENCE

\_\_\_\_\_ Christian      \_\_\_\_\_ Years

Home Church \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Pastor \_\_\_\_\_

Association \_\_\_\_\_

Southern Baptist \_\_\_\_\_ Years \_\_\_\_\_

Present Church \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Pastor \_\_\_\_\_

Association \_\_\_\_\_

### PARTICIPATION IN ORGANIZATIONS:

	Past	Present	Office or Leadership Responsibilities
Sunday School	_____	_____	_____
Discipleship Training	_____	_____	_____
Women on Mission	_____	_____	_____
Mission Friends	_____	_____	_____
Girls in Action	_____	_____	_____
Children in Action	_____	_____	_____
Youth on Mission	_____	_____	_____
Acteens	_____	_____	_____
Royal Ambassadors	_____	_____	_____
V.B.S.	_____	_____	_____
BCM	_____	_____	_____

Other Church and Mission-Related Activities and Organizations during past year:

---



---



---



---



---



---

**REFERENCES:**

Give name and complete mailing address for each: (Please be specific and accurate. List someone other than a relative.)

**Your current Professor**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

**Your Pastor or other Staff Minister (Current Church)**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

**Your WMU Director or WMU Age Level Director/Leader (Home or Current Church)**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Please provide the following on attached pages (not to exceed two typed, double spaced pages).

- A summary of your Christian walk up to this time in your life, including how God has worked in your life during this current year.
- What specific life goals do you have and how will seminary help your prepare for these goals?  
*Renewal Applicants: Please include how you are currently fulfilling your commitment to be involved in mission's education through a WMU organization. Please attach typed page.*

---

Signature of Applicant

---

Date