

Dear Applicant:

Greetings in the name of our Lord and Savior, Jesus Christ! Thank you for your interest in the *Glad Tidings Gospel Ministry* scholarship program. Our ministry provides financial support to students that meet at least <u>one of the following criteria</u>: students who plan to serve in inner-city ministry, students who have parents who serve/served as missionaries, or students who come from unbelieving families that do not support their Christian education.

In order to be considered as a recipient of this scholarship you must fit at least one of the above criteria and complete the following items:

- 1) SCHOLARSHIP APPLICATION: Please complete the entire application.
- 2) PERSONAL TESTIMONY: Please include your personal testimony on a separate piece of paper (see additional details on page 3 of the application packet). Be sure to explicitly explain in your testimony HOW you fit one of the three scholarship criteria.
- 3) PICTURE (mail or email in with the application): Please include a picture of yourself (head and shoulders). This will have no bearing on your acceptance. In the future some of our scholarship recipients will be featured on our website and other promotional materials. It will be any scholarship recipient's right to opt out of this use of their picture if they choose.
- 4) THREE REFERENCE LETTERS/FORMS: Please distribute these forms and have them returned to our office in individually sealed envelopes or emailed from your reference to info@gtmg.org. Your scholarship application will not be considered if you do not have **three** completed references.

Please return your completed application to our office by email (<u>info@gtgm.org</u>) by or before the application deadline. The application <u>deadline for the Fall semester is June 30th</u>, and the <u>deadline for the Spring semester is September 30th</u>.

Yours in Christ,

Robert Van Vossen President



SCHOLARSHIP APPLICATION FOR BIBLE OR CHRISTIAN COLLEGE (Max. \$700 per SEMESTER)

DATE OF APPLICATION	[:						
For which academic term are you requiring assistance?FALLSPRING 20							
Name of school attending:							
Mark level of school you as	re enrolling in:	undergra	ıduate ş	graduate	doctorate		
PERSONAL INFORMAT	ΓΙΟN:						
1. NAME:(LAST)							
(LAST)	(FIRST)		(MIDDLE)				
2. PRESENT ADRESSS: _		(OTD FET)		(0)	<u></u> ITY)		
		(STREET)		(C)	11 Y)		
(STATE)	(ZIP CODE)	(ARE	A CODE) PHON	E NUMBER			
3. EMAIL ADDRESS:							
4. DATE OF BIRTH	<u>//</u>	SEX	MALE	FEMA	ALE		
5. MARITAL STATUS: *If separated or oth				RATED OR	OTHER*		
6. PERMANENT ADDRE	SS:						
		(STREET)		(C)	ITY)		
(STATE)	(ZIP CODE)		(AREA CODE	E) PHONE NUM	MBER		
7. PARENT'S NAME (S):							
8. PARENT'S OCCUPAT	ION:		ANNUAL IN	NCOME:			

9. Please mark the scholars		s to you:								
plan to serve in inner										
have parents who serve/served as missionaries come from unbelieving families that do not support Christian education CHRISTIAN EXPERIENCE AND CHURCH MEMBERSHIP										
							10. How long have you kno	ow Jesus Christ as your per	rsonal Savior?	
							(NOTE: PLEASE ENCLO SALVATION AND WAL		ESTIMONY GIVING DE	CTAILS OF YOUR
11. Are you a member of a	local church? Yes [No* (If no, explain	in personal testimony)							
If yes, list the church's nan	ne and address:									
		(NAME)								
(STREET)	(CITY)	(STATE)	(ZIP CODE)							
10. Do you believe in the d	leity of our Lord Jesus Chri	ist and agree with the doc	trine set forth in the Apostle's							
Creed: Yes No										
*If no, please clearl with your application		ning Jesus Christ on a sep	arate letter and enclose along							
12. Briefly state your caree describing how your plan	÷ ±		•							

EDUCATIONAL INFORMATION:

13. List all schools attended, high school and above:				
(HIGH SCHOOL)	(LOCATION)	(DATES)		
(COLLEGE)	(LOCATION)	(DATES)		
(COLLEGE)	(LOCATION)	(DATES)		
(COLLEGE)	(LOCATION)	(DATES)		
 14. Have you been accepted by, or are you currently enrolled in a Christian college or graduate school? Yes* No *If Yes, which school:				
from Glad Tidings Gospel Ministries.				
(NAME)	(STREET)			
(CITY)	(STATE)	(ZIP CODE)		
FINANCIAL INFORMATION				
16. How much financial aid will you need for the desi	red semester?			
17. Will you have any additional sources of income or Yes No	financial aid while in so	chool?		
If yes list:				

REFERENCES:

18. Give the **COMPLETE** names and phone numbers of your **three** references. The references should be: your current or past pastor, a current or former teacher/professor, and a reference from your professional experiences. Completed references should be emailed from your reference to info@gtgm.org. **DO NOT USE RELATIVES AS REFERENCES!**

(PASTOR'S NAME)	(AREA CODE) PHONE NUMBER
(TEACHER/PROFESSOR)	(AREA CODE) PHONE NUMBER
(PROFESSIONAL)	(AREA CODE) PHONE NUMBER



SCHOLARSHIP AGREEMENT

PLEASE READ THE FOLLOWING CAREFULLY:

It is the official policy of Glad Tidings Gospel Ministries, Inc. that all students who have received financial assistance from Glad Tidings but **DO NOT** enter full-time Christian work upon graduation or leaving school, are to repay their loan (interest free) at convenient installments over a reasonable period of time. The repayment schedule should be cleared by Glad Tidings upon entering secular work.

Glad Tidings holds a fundraising and informational banquet each year in late Spring, to help inform the public about our ministry, while also seeking to raise additional money for scholarships. With your acceptance of this scholarship, we ask that you make time to attend this banquet in order to share how Glad Tidings' partnership has helped further your education and ministry. Please note that we only expect your attendance if you are within reasonable distance from Chicago (we do not require out-of-state recipients to attend).

I hereby state that all the above information sub- correct to the best of my knowledge. I have read and under Gospel Ministries, Inc. (above) and I agree	rstood the scholarship agreement of Glad Tidings
(SIGNATURE OF APPLICANT)	(DATE)