

CHURCH

Name _____ Association _____

Mailing _____

Are you a Christian? ___ How long? ___ Church member? ___ How long? _____

Church organizations in which you are involved _____

Involvement in WMU (Acteens, Girls in Action, Children in Action) _____

Do you have specific responsibilities in these organizations? _____ Describe them:

Answer the following questions in paragraph form. Attach your answers to this form.

1. How did you become a Christian? Write your personal testimony.

2. At this point in your life, what are some of your dreams and hopes for your future?

REFERENCES: Please give complete mailing addresses. References should be someone other than a relative.

Pastor	complete mailing address (including city, state, and ZIP code)	() phone number
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Personal Reference or High School Principal	complete mailing address (including city, state, and ZIP code)	() phone number
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High School Counselor or College Advisor	complete mailing address (including city, state, and ZIP code)	() phone number
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The information in this application is correct to the best of my knowledge.

Applicant's Signature _____

_____ Date

Mail to: SCHOLARSHIPS, KY WMU, PO Box 436569, Louisville KY 40253-6569 by February 1 .