

APPLICATION FOR THE NATIONAL MINISTERS' WIVES
PREACHER'S KID SCHOLARSHIP

Name: _____

Birthday _____ Birthplace _____

Address: _____ City & State _____ Zip Code _____

Parent(s) Name: _____

Address: _____ City & State: _____ Zip: _____

Home Telephone #: _____ Temple # of your Membership _____
Cell# _____

EDUCATIONAL ACCOMPLISHMENTS

Date of High School graduation: _____ Name of school: _____

High School Achievements/Honors: _____

High School Activities Participation: _____

Other Educational Goals: _____

College in which you are accepted: _____

Grade Point Average: _____ Major: _____

VOCATIONAL GOALS

List your goals: _____

If employed, type of work: _____

RELIGIOUS LIFE

Date in which you joined church: _____ Pastor _____

Religious Activity: _____

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WHY DO YOU DESIRE TO BE THE RECIPIENT OF THE SCHOLARSHIP? (200 Words or more)

Community Service: _____

RECOMMENDATIONS

1. SCHOOL OFFICIAL (Counselor): _____

Signature: _____

2. High School Transcript and sealed letter from counselor listing your
grade point average included: Yes _____ No _____
(Grade point average must be 3.0 or higher)

3. COLLEGE ACCEPTANCE LETTER: Yes _____ No _____

If no, Why? _____

4. PERSONAL REFERENCE: _____

5. Pastor of your church reference: _____

Signature: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

**Please enclose two 4x6 senior pictures (not returnable). Deadline for your
To submit you pictures is __/__/__.**

Date Application Submitted _____

Date Application Received: 1st Day of National
Convention, 7/23/2013

Application Received By: _____