# FCA LEADERSHIP TRAINING SCHOLARSHIP APPLICATION

(Application due date is June 30)

\*Applicants please note: all of the following information will be kept in strict confidence by the Selection Committee

| Name:                     |             |             | Phone #:    |              |  |
|---------------------------|-------------|-------------|-------------|--------------|--|
| Address:                  |             |             |             |              |  |
|                           |             |             | Postal C    | ode:         |  |
| E-mail:                   |             |             |             |              |  |
| Birthdate:                | S.I.N:      |             |             |              |  |
| Marital/Family Status:    |             |             |             |              |  |
|                           | Widowed     |             |             |              |  |
| If you have dependent chi | ildren, plo | ease indica | te the numb | er and ages: |  |
| FCA Home Church:          |             |             |             |              |  |
| How long have you atte    | ended? _    |             |             |              |  |
| Pastor's Name and Pho     | ne #:       |             |             |              |  |
| Are you a committed Cl    | hristian?   | YES or      | NO          |              |  |
| Please comment:           |             |             |             |              |  |
|                           |             |             |             |              |  |
|                           |             |             |             |              |  |
|                           |             |             |             |              |  |
|                           |             |             |             |              |  |

| ducation:             | Educati |
|-----------------------|---------|
|                       |         |
|                       |         |
| mployment Experience: | Employ  |
|                       |         |
| urrent Occupation:    |         |
| hurch Involvement:    | Church  |
|                       |         |
|                       |         |
| ommunity Involvement: | Commu   |

### Plans to work in the Lord's Harvest:

On a separate sheet of paper describe your call to ministry, your plans at this point in time and your openness or commitment to working within the Fellowship of Christian Assemblies. (Include this with your application.)

### **Financial Information:**

Please state the value of your assets, including cash which are readily available to finance your education:

Do you plan to work during the school year or to be a full time student? Please comment: \_\_\_\_\_

Will family or others financially support you during your schooling?

YES or NO If yes, to what extent in dollars? \_\_\_\_\_

## Last Bible College/Seminary Year Completed: \_\_\_\_\_

Name of College: \_\_\_\_\_

Date completed: \_\_\_\_\_\_ Grade Point Average: \_\_\_\_\_

Name the proposed College/Seminary of choice for the coming term:

| Address: |         |
|----------|---------|
| Phone:   | E-mail: |

I have:

\_\_\_\_ Read the description of the Scholarship application and believe that I meet the criteria for this scholarship.

\_\_\_\_ Given a reference form to a leader in my home church who is connected with the F.C.A.

- \_\_\_\_ Given a reference form to an acquaintance who knows me well.
- \_\_\_\_ Included a separate page describing my future plans.
- \_\_\_\_ Attached proof of acceptance at the above named college.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Please return to:

### **FCA Scholarship Fund**

c/o Valeria Dueck 49218A RGE RD 182 Beaver County, AB TOB 4J3

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