

APOLLOS SCHOLARSHIP APPLICATION

Omaha Presbyterian Seminary Foundation

7101 Mercy Road Suite 216
Omaha, Nebraska 68106-2616

**Please type or generate on a computer.
If your Application is not legible, it will not be reviewed.
Application Deadline: March 1st**

I. PERSONAL HISTORY

Name: _____

Permanent Address: _____
(Street Address)

(City) (State) (Zip)

Date of Birth: _____ Daytime Phone: _____

E-mail Address: _____

II. EDUCATIONAL HISTORY

College or Seminary	Date of Enrollment	Date Terminated	Degree	GPA Earned
(Degree-granting College)				College
(Seminary Where Enrolled)				Graduate

This Application is incomplete without official college(s) or seminary transcript(s).

This fall, I am enrolled as a junior
middler
senior at _____ Seminary.

III. CHURCH HISTORY

Church where you are a member: _____

Church Address: _____

I am under the care of the _____ Presbytery.

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IV. REFERENCES - Be sure to request permission and current contact information for each individual. Do not include any relatives as references.

1. _____
A friend of your choosing Home Address

Daytime Phone City State Zip

Email Address

2. _____
An elder from your church Home Address

Daytime Phone City State Zip

Email Address

3. _____
The pastor of your church Home Address

Daytime Phone City State Zip

Email Address

4. _____
A second pastor who knows you well Home Address

Daytime Phone City State Zip

Email Address

5. _____
A college professor or business associate * Home Address

Daytime Phone City State Zip

Email Address

6. _____
A second professor or business associate * Home Address

Daytime Phone City State Zip

Email Address

*** If you graduated over five years ago, you may substitute the name of a seminary professor or a business associate.**

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9. In what ways have you been active in the church?

10. Give a brief description of your spiritual pilgrimage.

11. How would you describe yourself in 500 words or less?

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VI. FINANCIAL INFORMATION

13. What is your indebtedness at this point?

Student Loans _____

Credit Cards _____

Specify Others _____

14. How do you intend to support yourself and/or family, if applicable, and pay for your seminary education?

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VII. WAIVER OF RIGHT TO PRIVACY

(This page must include an original signature.)

I hereby authorize the Omaha Presbyterian Seminary Foundation to request and receive information about me, which the Foundation deems necessary. This personal information is solely for considering my Apollos scholarship application since I am enrolled as a seminary student at one of the 10 accepted Presbyterian theological seminaries.

Waiving any rights to privacy that may apply by law, I authorize educational and financial institutions, church bodies, businesses, and individuals who have knowledge about me to disclose such information to the Omaha Presbyterian Seminary Foundation for its use in evaluating my application for an Apollos Scholarship.

Date

X _____
Signature of Applicant

Printed Name of Applicant

Email Address

Filename: apollos_application
Directory: P:\Projects New\Omaha Presby\web_0109\pdf
Template: Normal.dot
Title: 2120 South 72nd Street, Suite 427
Subject:
Author: Karen Maas
Keywords:
Comments:
Creation Date: 3/3/2009 3:11:00 PM
Change Number: 2
Last Saved On: 3/3/2009 3:11:00 PM
Last Saved By: cla
Total Editing Time: 1 Minute
Last Printed On: 3/3/2009 3:13:00 PM
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Number of Characters: 3,963 (approx.)