



Due: May 1 for the fall semester
December 1 for the spring

Application for the Grace Church of the Valley Scholarship

INSTRUCTIONS

1. Please print in blue or black ink, or type.
2. Please complete all sections.
3. If you have any questions, please call (661) 362-2295 or email kricedorff@masters.edu.
4. Send completed packet to:

The Master's Seminary | Financial Aid
13428 Roscoe Blvd, Sun Valley, CA 91352

****For TMS Use Only****

Date Received: _____
 Scholarship Fund: _____
 Amount of Aid:
 Fall _____ \$ _____
 Spring _____ \$ _____
 Approved by: _____

STIPULATIONS

1. Recipients must study at Central Valley Distance Location campus located in Kingsburg, California.
2. Recipients must maintain at least a 3.0 cumulative GPA and be a full time student in the B.Th., or M.Div. programs.
3. Recipients must live a life in harmony with the qualities detailed below the "Considerations" heading.
4. Recipients will be awarded for one academic year and may reapply for the following academic year.
5. Recipients must have been a member of Grace Church of the Valley for one year or currently in process of becoming a member.
6. The scholarship amount is dependent on availability of funds.
7. The availability of funds is contingent upon budgetary approval for each academic semester.

STUDENT INFORMATION

Student ID Number	Name: Last	First	Middle Initial
P000 ____ ____			
<small>If unknown, use the last 4 of your SSN</small>			
Address: _____			
City: _____		State/Zip: _____	Country: _____
Email: _____		Phone Number: _____	
Wife's name: _____		Undergraduate Institution Attended: _____	

CONSIDERATIONS

Please attach the following to this application:

1. Proven Character – Assess your proven character according to 1 Timothy 3:1-7 (100-150 words).
2. Ministry Aptitude – Explain your involvement in the local church, detailing your ministry experience (100-150 words).
3. Academic Performance – Detail your study habits and include your current GPA (50-100 words).
4. Desire for full-time Pastoral Ministry – Write about your desire for full-time pastoral ministry (100-150 words).

SIGNATURE

My signature below certifies that I qualify for this scholarship based on the stipulations listed above.

Student Signature: _____ Date: _____
Electronic Signatures are not Accepted



CONSENT TO DISCLOSURE OF PERSONAL INFORMATION

Type of Scholarship Applied for: _____

Student's Full Name: _____

Student's Email Address: _____

I agree to disclose information regarding my student account including, but not limited to: GPA, finances, Ministry Aptitude Score, and future ministry plans. I affirm that this information will be used for Development purposes. I consent to such disclosure.

I agree

APPROVED BY -- Student

ACCEPTED BY -- TMS

Signature

Signature

Printed Name

Printed Name, Title

____ / ____ / ____
Date

____ / ____ / ____
Date