



## **ALLIANCE WOMEN MISSIONS SCHOLARSHIP**

### **Policy Statements**

- A. Policy covering US students:
1. Eligibility criteria:
    - a. Student has accepted Jesus Christ as his/her personal savior and be a member of Hmong District of the Christian and Missionary Alliance.
    - b. Attending an accredited Bible college or seminary.
    - c. Women majoring in one of the following majors: Missions, Cross Cultural Studies, or Missions related Major.
    - d. Has Grade Point Average (GPA) of at least 2.0 on a 4.0 scale. Student with GPA lower than 2.0 may only be considered for scholarship under extraordinary circumstance.
    - e. Part time student and student under extension program may also be eligible for scholarship.
    - f. Application forms are due to the Hmong District office no later than July 31<sup>st</sup> before the School year begins.
  2. Obligations. If student changes major outside of the majors stated above, dropped out for any reason that has not been approved by the District Superintendent of Hmong District, or upon completion of his/her degree and he/she refuses to minister with the Christian and Missionary Alliance then he/she may be liable to repay the scholarship already provided.
  3. Grant amount is determined by the Scholarship Committee or its chair with the approval of the District Superintendent based on these factors:
    - a. Availability of fund
    - b. Budget need
    - c. Family's financial ability
    - d. Family size

# ALLIANCE WOMEN SCHOLARSHIP ASSISTANCE APPLICATION FORM

## SECTION I

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Remarried

Number of dependent children: \_\_\_\_\_

Having accepted Jesus Christ as my personal Savior, I am presently a member in good standing with the \_\_\_\_\_ church.

## SECTION II

Name of College or Seminary you are applying scholarship for: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date Class Start: \_\_\_\_\_

Major Enrolled: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

Degree: \_\_\_\_\_

# SECTION III

## Read and initial on the lines

\_\_\_\_\_ I accept the doctrine of the Lord Jesus Christ as Savior, Sanctifier, Healer and Coming King and am in full sympathy with the policies, principles, objectives, and the worldwide missionary programs of the Christian and Missionary Alliance and shall endeavor to support it in every way.

\_\_\_\_\_ I understand that the due date for new or renewal application is July 31. If the Application is received after the due date, scholarship may not be awarded.

\_\_\_\_\_ I realize that Hmong District provides financial assistance only if the funds are available.

\_\_\_\_\_ I understand that only Hmong students from Alliance churches who major (not Minor) in Mission, Cross Cultural Studies, or Missions related majors can apply for Hmong District Scholarship.

\_\_\_\_\_ I also understand that if I discontinued any of the majors above or drop out for any reason that has not been approved by the District Superintendent of Hmong District or upon completion of my degree I refuse to serve with the Christian and Missionary Alliance for the glory of God, I may Be liable to repay the scholarship already provided.

I have read and understand the conditions and obligations stated above. By signing below, I fully accept the statements and agree to abide by them.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## SECTION IV

What is the highest grade you've completed? \_\_\_\_\_

List the high school (s) and college (s) attended:

<b>Name of School</b>	<b>Period (to)</b>	<b>GPA</b>	<b>Degree</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## SECTION V

List church activities in which you are participating or have participated in the past:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you been ordained to Christian Ministry? \_\_\_\_\_ If "Yes" please indicate date and with what denomination? \_\_\_\_\_

Complete record of service with the Christian and Missionary Alliance

<b>Ministry Position</b>	<b>Place</b>	<b>Date Started</b>	<b>Date Stopped</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What type of credential do you hold? \_\_\_\_\_

# SECTION VI

## Supplemental Forms

\_\_\_\_\_ Attach with this application one or two-page (s) account of how you come to know the Lord Jesus Christ as your Savior and why you study in the preparation for International Ministries.

\_\_\_\_\_ Detach **Financial Aid Form and** send it to the College or Seminary Office where you will be attending.

\_\_\_\_\_ Detach the **Recommendation Form** and send it to your pastor or elder.

\_\_\_\_\_ Request the College Registrar's Office to send a copy of your transcript to the Office of Hmong District Missions Department.

Please note that all these supplemental forms also need to be received by Hmong District by the due date.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### FOR OFFICE USE ONLY

Upon receiving all the information provided by the applicant, I do, hereby recommend an assistance for the total of \$\_\_\_\_\_ for both semesters of \_\_\_\_\_/\_\_\_\_\_, and to be reviewed each academic school year.

\_\_\_\_\_  
Signature of Scholarship Chairperson

\_\_\_\_\_  
Date

# HMONG DISTRICT SCHOLARSHIP ASSISTANCE FINANCIAL AID FORM

**PART A: (To be completed by the student)**

Application for school year \_\_\_\_\_ to \_\_\_\_\_

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

I authorize \_\_\_\_\_ college or seminary to release the following information to Hmong District of The Christian and Missionary Alliance for the purpose of determining eligibility for scholarship fund.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PART B: (To be completed by the college or seminary)**

Student's major: \_\_\_\_\_

Financial Aid Budget	Need Analysis
Tuition/Fees _____	Budget _____
Room & Board _____	Parent contribution _____
Books & Supplies _____	Expected in _____
Personal Exp. _____	Summer saving _____
Transportation _____	Spouse & Children _____
Other _____	Other _____
<b>Total:</b> _____	<b>Need</b> _____

**Financial Aid Award**

<b>Gift Aid:</b>	Pell Grant _____	
	SEOG _____	
	State Grant _____	
	Institution Grant/Scholarship _____	
	Other _____	
<b>Loan Aid</b>	Loan _____	
<b>Employment:</b>	_____	

Please complete and return this form to: **Missions Department  
Hmong District  
12287 Pennsylvania St.  
Thornton, CO 80241.  
[Missions@Hmongdistrict.org](mailto:Missions@Hmongdistrict.org)**

# HMONG DISTRICT SCHOLARSHIP ASSISTANCE RECOMMENDATION FORM

## To be completed by your pastor or elder

I, \_\_\_\_\_, pastor or elder of the \_\_\_\_\_  
\_\_\_\_\_ church, hereby recommend \_\_\_\_\_  
\_\_\_\_\_ for scholarship assistance. I understand that  
he/she is a good member in good standing with our congregation.

\_\_\_\_\_  
Signature of Pastor or Elder

\_\_\_\_\_  
Date

On the space below, please provide some comments on the person you recommended and why you are recommending this person.

Please complete and return this form to:

**Missions Department**  
**Hmong District**  
**12287 Pennsylvania St.**  
**Thornton, CO 80241.**  
[Missions@Hmongdistrict.org](mailto:Missions@Hmongdistrict.org)