



**Deadline: June 30, 2020**

**Local Pastor Scholarship Application Checklist  
2020 - 2021 Academic Year**

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**REQUIRED Documents:**

- Application Form
- One-page Call to Ministry Statement
- Current academic transcript
- Brief narrative and/or documentation supporting financial need
- Two letters of recommendation
- For scholarships available to first-year Course of Study students, include copy of acceptance letter

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Application and supporting documentation must be returned to the Nebraska United Methodist Foundation and postmarked by:

**June 30, 2020**

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Mail to the following address:

Nebraska United Methodist Foundation  
Attention: Matt Fowler, Director of Stewardship  
100 W Fletcher Ave Ste 100  
Lincoln, NE 68521

***For Foundation Use Only***

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



### Local Pastor Scholarship Application 2020-2021 Academic Year

After careful review of the Scholarship Guidelines, please check the scholarships for which you are applying and return only one application.

- Gifts from the Heart Local Pastor Scholarship
- Frederick and Esther Paulus Local Pastor Scholarship

Will you be a:

- New student
- Continuing student
- Returning student from Inactive Status

#### Personal Information

First Name		Last Name		
Address		City	State	Zip Code
Phone Number	Email Address			Date of Birth

#### General Information

YES NO

- Are you a certified candidate for ministry in the Great Plains Conference?  YES  NO
- Are you a member of a Nebraska United Methodist Church?  YES  NO  
If yes, which church? \_\_\_\_\_
- Are you a current pastor or do you plan to become a pastor in the Great Plains Conference?  YES  NO
- Do you have an ordained ministry mentor?  YES  NO  
If yes, who is your mentor? \_\_\_\_\_
- Have you ever been convicted of a felony? (If yes, please explain on another sheet of paper.)  YES  NO

Education: Please use a separate sheet of paper if needed.

Student ID #: (if applicable) \_\_\_\_\_

Name & Location required for all. Please include <u>full address</u> of current school.		Start Date	Graduation Date (or expected date)	Cumulative GPA
High School				
College				
Seminary				

**Employment History:** Please include the previous 5 years; use a separate sheet of paper if needed.

Date: Month & Year	Name of Employer	Salary	Job Title	Duties
From				
To				
From				
To				
From				
To				

**Financial Information:** Please list other scholarships, grants-in-aid, and/or financial assistance you are now receiving or for which you have made application.

Type of Financial Aid	Source	Amount	Check if Received	Check if In Application

**Letters of Recommendation:** Please provide the information below for those you have asked as a reference.

Name	E-mail Address	Phone Number

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

\_\_\_\_\_  
Date