## GAYLE BEEBE FRIENDS CENTER SCHOLARSHIP APPLICATION

## FOR FALL SEMESTER (Due by August 1.)

## PERSONAL INFORMATION

Name	Social Security no			
Address	Date of birth			
City	St	ate	ZIP	
Phone (Home)	(Work)	Email		
Marital status	Spouse			
MINISTRY INVOLVEMEN	T/LEADERSHIP			
Organization				
Position(s)				
Time commitment ()	Full time ( ) Part t	ime	Hours per week	
Length of service				
Other employment				
References as to leadership	ip abilities and character (Inc	lude phone r	numbers.):	
1.				
2.				
ACADEMIC RECORD				
Present grade-point avera	ge:		-	
Do you grant approval for	r review of your transcripts?			
References to academic w	ork (Include phone numbers	.):		
1.				
2.				

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REFERENCE
Phone number
Church supervisor (pastor or chairperson)
COMMITMENT TO FRIENDS
How long have you been a part of a Friends ministry?
What are your future plans with regard to ministry among Friends?
The Friends Center does not discriminate on the basis of race, color, national orgin, or gender in any of its policies, practices, or procedures.
Applicant must be accepted into the Haggard Graduate School of Theology at Azusa Pacific University and enrolled in a graduate degree program for credit.
Applications are reviewd by the Scholarship Committee of the Friends Center Board and are due August 1.
Scholarships will be awarded based upon the following criteria:
• Friends Center student
• Evidence of leadership ability, academic performance, and character
The applicant must complete the semester for which the scholarship is awarded. If the applicant withdraws from classes or leaves ministry among Friends to minister among another denomination, the funds are returned to the Friends Center scholarship fund.
Announcement of scholarship award will be made to the applicant by the Friends Center director.
The amount of award is applied toward the recipient's finance account with Azusa Pacific University.
I understand that the Friends Center scholarship is awarded on the bases listed above. I have answered the questions to the best of the knowledge and I understand the qualifications listed above. I further understand that the award is withdrawn if the semester is not completed.
Signature Date