

Rocky Mountain Yearly Meeting Scholarship Program

Missions Application

Name: _____ Birthdate: _____

Address: _____

City, State, & Zip: _____ Phone: _____

E-Mail address: _____ Home Church: _____

Schools attended previously, i.e. High School, College... with GPA and dates attended:

What school are you attending?

References: *Name* *Address*

Pastor: _____

Teacher: _____

Business Person: _____

Friend: _____

Please include the following information on a separate sheet of paper.

- Testimony of conversion.
- Testimony of God's call on your life to Missions.
- What steps do you plan to take to complete your preparation for this ministry?
- Comment on your ministry experiences.
- Your reason(s) for applying for this Missions scholarship.

Signed: _____ Date: _____

Please return the application to: Rocky Mountain Yearly Meeting Office, 2748 E. Pikes Peak Ave.
Colorado Springs, CO 80909 Deadline: May 1st. Rev. 03-2019