



LA District NMI Scholarship Application

Please complete the following form (*with* your parent/guardian if under 18).

Name _____

Parent Name(s) _____

Address _____ City _____ Zip _____

Email Address _____

Home Phone _____ Applicant Age _____ Applicant Grade (if applicable) _____

Event/Project for which scholarship is needed _____

The total cost for this event/project is \$_____. I am requesting help with \$_____ of the total cost.

Please describe your involvement in missions.

Why do you believe it is important for you to attend this event/project?

Please describe the situation that causes your need at this time.

I understand that it is impossible and unwise for every applicant to be given a scholarship. I also realize that it is very unlikely that a applicant will receive a full scholarship and will do my best to raise money in creative ways on my own.

Signature of Parent/Guardian)

(Signature of Applicant)

Please forward this document to:
LA District NMI, Attn: Debra Hamrick, 4326 Calle Real, #33, Santa Barbara, CA 93110



LA District NMI Scholarship Reference Form

To be completed by scholarship applicant:

Name _____

Event/Project for which scholarship is needed _____

Local Church Name: _____ Pastor's Name: _____

To be completed by scholarship applicant's pastor:

The above named student/young adult is applying for a mission's scholarship to the event also listed above. Please fill out this reference form to the best of your ability. Use another page if necessary.

1. How long have you know this person? _____

2. Please describe this person's heart for missions.

Please use the following scale to respond to questions 2 through 8:

1 - low 2 - below average 3 - average 4 - very good 5 - excellent

How would you rate this person in the following:

- | | | | | | |
|--|---|---|---|---|---|
| 3. Involvement in the local church? | 1 | 2 | 3 | 4 | 5 |
| 4. Following through with commitments? | 1 | 2 | 3 | 4 | 5 |
| 5. Ability to work in a team setting? | 1 | 2 | 3 | 4 | 5 |
| 6. Hardworking? | 1 | 2 | 3 | 4 | 5 |
| 7. Ability/desire to evangelize? | 1 | 2 | 3 | 4 | 5 |
| 8. Spiritual maturity? | 1 | 2 | 3 | 4 | 5 |

9. What are the applicant's greatest strengths?

10. Do you have any concerns about this person being a part of a mission's project? If so, please explain.

Pastor's Signature

Pastor's Phone Number

Thank you for taking time to fill out this recommendation. Please forward this document to:
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