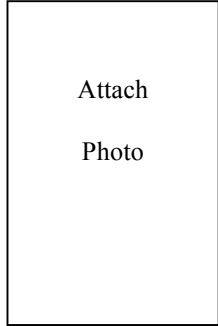


APPLICATION FOR GRADUATE STUDIES AID
International Scholarship Fund
Free Methodist World Conference

(This scholarship aid is available to assist members of the Free Methodist Church only.)



Applicant's name: _____

Address (country of residence): _____

Marital status: ___ Married ___ Single Number of Children: ___ Ages: _____

Nationality: _____ Date of Application: _____

Name of Local Church or Conference membership: _____

Number of years: _____ Ordination status: _____

Education:

Degree	Institution attended	Graduation Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

In what capacity have you served in the Free Methodist Church since receiving an undergraduate degree?
_____ For how long? _____

What are your present responsibilities in the Free Methodist Church? _____

Describe proposed study plan for which you seek scholarship aid¹: _____

What degree are you seeking? _____ How long will it take? _____

What institution will you attend? _____

Why are you seeking this degree? _____

Has your graduate study plan been presented to and approved by your annual conference or its designated committee? ___ Yes ___ No (If yes, when and to whom? _____)

In what capacity do you anticipate using your graduate studies in the Free Methodist Church upon graduation? _____

¹ Students are expected to attend schools within their own country or continent whenever possible.

If you are planning to attend an English-speaking institution, are you making plans to take the required English proficiency exam? Yes No

Where and when? _____

What will be the academic costs of your studies for the first year? _____

For the total program you anticipate? _____

What amount of your living expenses will you need from outside sources per year? _____

Are other sources of aid available to you? Yes No

If so, how much per year? _____ Are you applying for this aid? _____

How will your family (if you have one) be cared for while you study? _____

Please describe your personal Christian experience, beginning with conversion:
(Use additional page if necessary.)

What is your specific call to ministry? _____

Do you understand that you are expected to repay your scholarship by serving in the Free Methodist Church following the completion of your studies and that you will be responsible for repaying in cash any amount of the scholarship not repaid in service? Yes No

Do you agree to this plan? Yes No

[As a condition of the award of a scholarship or other assistance, the candidate must commit himself or herself to serve in a position proposed by the conference of the student's origin and approved by the Scholarship Committee of the World Conference for a period of time equal to the period of time for which assistance is received from the fund. In the event any recipient should fail to perform such service, failure shall constitute an agreement to repay the amount of the scholarship or other assistance to the fund.]

Signed _____

Date _____

REFERENCES

Please request that at least three of the following people to send **letters of recommendation directly to your Area Fellowship Executive**.

1. Present supervisor in your ministry or work
2. A pastor who knows you well
3. Your Bishop
4. Your Area Director for the Department of World Missions
5. Your MEG Board, as requested on page 1 of this application

Send application and letters of recommendation by mail or fax to:
(Area Fellowship will indicate appropriate address & fax number:)

International Scholarships
