Operating from The Inside Out

Mt. Gilead Full Gospel International Ministries Scholarship Fund Young CEO 2018 Scholarship Application

Please provide the following information based on the Fall 2018 school semester and complete the scholarship application in its entirety. Only complete applications will be considered. All applicants must be enrolled in an accredited institution during the 2018-2019 academic year and should be ready to provide evidence of financial need if asked. Applicants must be members of Mt. Gilead Full Gospel International Ministries and actively serving on Helps Ministry. All completed applications must be **received** by Young CEO no later than **Wednesday**, **July 18**, **2018**, **regardless of post mark**. Applications can also be submitted at the Young CEO table in the grand concourse between services when a table is available or submitted in a clearly labeled envelope or folder and placed in the Young CEO mailbox located in the Helps Ministry room after service on Sundays or Wednesdays. You can also visit MtGileadFGIM.org/YoungCEOScholarship for more information. Again, the cutoff for receiving all applications is Wednesday, **July 18**, **2018**.

Extra Credit Points: Additional consideration will be given to applicants who are active with Youth Ministry or Young CEO (2.5 extra credit points) and those who help clean the Sanctuary per request of Bishop Daniel Robertson Jr. (5 extra credit points).

APPLICANT INFORMATION:

Full Name: Street Address: _____ Date of Birth: City/State/Zip: _____ Cell No.____ E-mail Address: Anticipated financial need for (Fall 2018) Anticipated financial need for housing (Fall 2018) Anticipated financial need for books (Fall 2018) Total anticipated financial need (Fall 2018): College or University you plan to attend (Fall 2018) **EDUCATION** High School _____ From_____ To ____ GPA ___ Degree/Specialty____ From_____ To ____ GPA ____ Degree/Specialty____ Address From To GPA Degree/Specialty

2

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REFERENCES: Please list the three references that will be providing you with letters of recommendation. Please note that at least one letter should be an academic reference from a teacher or professor of the applicant and at least one letter should be from a Pastor, Elder or Overseer of a Helps Ministry on which the applicant serves. All letters of recommendation should be signed and sealed.

Title	Phone	Address
Full Name	Relationship	
Title	Phone	Address
Full Name	I	Relationship
Title	Phone	Address
Full Name	Relationship	
LEADERSHIP HISTORY	Y: Please list volunteer, church, civ	ric or work activities.
Company/Organization:		
Phone number:		
Address:	Supervisor/ Leader:	
Job Title		
From To	Reason for Leaving: _	
May we contact your super	visor/leader for a reference? YES	NO
Company/Organization:		
Phone number:		
Address:	Supervi	sor/ Leader:
Job Title		
Responsibilities		
	Reason for Leaving:	

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May we contact your supervisor/leader for a reference? YES NO

Company/Organization:		
		_
	Supervisor/ Leader:	
Job Title		_
		_
	Reason for Leaving:	_
May we contact your supervisor/le	ader for a reference? YES NO	
Company/Organization:		
Phone number:		_
Address: Supervisor/ Leader:		
Job Title		_
		_
	Reason for Leaving:	_
May we contact your supervisor/le	ader for a reference? YES NO	
AREAS OF INTEREST: Please beside that area (i.e., Engineering	ndicate your top 3 areas of interest (in order of your preference) by placing 1, Music/Arts – 2).	ng a number
Advertising/Marketing	Culinary Arts	
Engineering	Human Services	
Medicine	Real Estate	
Business Entrepreneurship	Debate/ Rhetoric	
Music/Arts	Information Technology	
Communications	Retail Management	
Finance	Economics/Economic Policy	
National Security	Law	
Criminal Justice	Science	
Human Resources	Education	

Operating from The Inside Out **Public Policy** Literature/Poetry Other: OTHER INFORMATION: Do you have a parent/guardian that needs to be contacted should you be awarded a scholarship? If so, please provide their contact information below in the event that you are awarded a scholarship. Full Name: Street Address: City/State/Zip: Phone Number: Email Address: I certify that my answers are true and complete to the best of my knowledge. My one-page essay on the assigned topic, along with my three signed and sealed letters of recommendation, and a copy of my most recent academic transcripts are attached. I intend to submit my completed application at the Young CEO table in the grand concourse, deliver it to the Young CEO Mailbox or mail it to the following address: Mt. Gilead Full Gospel International Ministries ATTN: Young CEO (Christian Executive Overcomer Scholarship) 2501 Mt. Gilead Blvd. Richmond, VA 23235 Signature Date