



Ministerial Scholarship Application Packet

J.S. Winston Sound Doctrine Foundation

"But speak thou the things which become sound doctrine." Titus 2:1

P.O. Box 763503, Dallas, TX 75376

Phone/fax ~ 972.329.0241 Website ~ www.jswinstonsdf.org

IMPORTANT REMINDER - In order for your application to be considered for this award, you must submit your application to the Financial Aid Office with **ALL** of the additional documentation by the announced deadline. Late or incomplete applications will not be considered. Pay attention to details.

Scholarship Objectives

1. Recognize and reward the academic excellence of ministerial students who choose to enroll in the Biblical Studies program at Southwestern Christian College.
2. Assist recipients in meeting their financial needs as they pursue higher Christian education.

Minimum Personal and Academic Requirements for Consideration and/or Award

1. Active and faithful membership in the Church of Christ.
2. Demonstration of Christian character and lifestyle.
3. Proof of enrollment at Southwestern Christian College during the semester of application.
4. Maintain a minimum cumulative GPA of 2.5 and full-time status at Southwestern Christian College. (minimum cumulative GPA of 2.5 required for incoming students from another college)

Minimum Requirements for Application

1. Complete a scholarship application in its entirety.
2. Submit an autobiography (including future aspirations in ministry) along with a recent 3x5 photo. This autobiography must be approximately one (1) double-spaced type-written page in length.
3. Submit a biography of Dr. J.S. Winston, Sr. This biography must be approximately one (1) double-spaced type-written page in length.
4. Submit three (3) typed letters of reference. These letters must include the contact information of your reference.



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Personal Information

First Name: _____ Middle Initial: ____ Last Name: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: _____ Alt. Phone: _____ e-mail: _____

1. Marital Status: Married ____ Separated ____ Single ____ Divorced ____

2. What areas of ministry are you interested in? (ex. family, music, youth, etc.)

3. Have you committed to earning the Bachelor of Science in Religious Studies from Southwestern Christian College? Yes ____ No ____ Undecided ____

4. What other financial assistance are you applying for this semester? Check all that apply. Private Loan(s) ____ TEG ____ SEOG ____ SwCC Work Study ____
Government Grant(s) ____ Federal Loan(s) ____ Other ____

5. What other financial assistance will you have?

6. Current GPA (if returning to SwCC): ____ Are you on any form of suspension? ____

Family Information

Spouse Name: _____ Age: ____ Relationship: _____

Dependents Name: _____ Age: ____ Relationship: _____

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Dependents Name: _____ Age: ____ Relationship: _____

Family References (required)

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Academic Information

High School Name: _____ Address: _____

Graduation Date: _____ GPA: _____

Other Schools or Colleges Attended

1. School Name: _____ Address: _____

Graduation Date: _____ Major: _____ GPA: _____

2. School Name: _____ Address: _____

Graduation Date: _____ Major: _____ GPA: _____

3. School Name: _____ Address: _____

Graduation Date: _____ Major: _____ GPA: _____

Church Affiliation

How long have you been a member of the Church of Christ? _____

Home Congregation: _____ Minister: _____

Address: _____ Phone: _____

Length of Membership at Congregation: _____

Ministry Involvement at Congregation:

I have read, complied and agreed to all of the requirements and stipulations regarding this scholarship. I have completed this application process in good faith and have only submitted information and documentation that is accurate to my knowledge.

Printed Name: _____ Signature: _____ Date: _____

In the event that I am awarded a scholarship from the J.S. Winston Sound Doctrine Foundation, I agree to financially support the foundation following my departure from Southwestern Christian College.

Printed Name: _____ Signature: _____ Date: _____

FOR OFFICE USE ONLY

Date Received: _____ Approved: __ Declined: __ Reason: _____

Signature: _____ Date Reviewed: _____ Award Amount: _____