THE KERUSSO SCHOLARSHIP
2015

Scholarship Application for the Following Schools ONLY:

- Bethlehem Seminary, Minneapolis, MN
- Gordon-Conwell Theological Seminary, South Hamilton, MA
- The Southern Baptist Theological Seminary, Louisville, KY
- Trinity Evangelical Divinity School, Deerfield, IL
- Westminster Theological Seminary, Philadelphia, PA
- Westminster Seminary, Escondido, CA

ELIGIBILITY CRITERIA

- Applicant must be pursuing a Master's of Divinity (M.Div.), a Master's of Theology (ThM), or a Master's in either Hebrew or Greek program leading to a full time Christian ministry vocation. A focus in preaching must be a priority.

- Applicant must be enrolled or planning to take a minimum of 9 credits.

Philosophy and Guidelines

Scholarship applicants should keep the following in mind:

- Awards will be effective for one year. Recipients will be eligible to apply each year, until the completion of their Degree.

- Awards will be distributed directly to the school and can be used for tuition, fees, supplies, and housing expenses. Awards used for housing expenses may be taxable to the applicant.

- All award decisions by the scholarship committee are final.

- Recipients must show proof of enrollment in school before receiving scholarship check.

- Falsification of any information will result in the withdrawal of any scholarship award and/or immediate forfeiture of any monetary awards.

- Failure of the student to fulfill all obligations of current coursework, or failure to enroll in a subsequent semester/term will result in the withdrawal
of the award, and the student will be obligated to repay any money already received.

- This is very selective process and, on average, only 3 scholarships are awarded each year.

**APPLICATION PROCEDURES**

- Please complete **all** of the following information. It is the responsibility of the applicant to ensure that this application is complete **before mailing and submitting anything to the National Christian Foundation Wisconsin**.

- Applicant is encouraged to submit an audio tape or CD of a sermon, devotion or teaching presentation that applicant has given. Messages must be your own work. Plagiarism will automatically disqualify applicants.

- Transcripts are required. Transcripts should be included with your application (signed and sealed in a school letterhead envelope).

- 3 letters of recommendation are required. Please submit these letters in sealed envelopes along with your completed application.

- Applications will be accepted now to be considered for the fall semester. All completed applications must be postmarked **no later than April 15, 2015**.

- Completed applications should be sent to:

  **The Kerusso Scholarship**
  c/o National Christian Foundation WI
  18650 W. Corporate Drive
  Suite 105
  Brookfield, WI 53045
APPLICATION FOR the KERUSSO SCHOLARSHIP

Applicant’s NAME ____________________________________________

I am planning to attend:

Name of Institution ________________________________

Address ________________________________

City/State/Zip ________________________________

Beginning date ________________________________

Full time or part time? ________________________________

Total number of years to complete program __________________

Degree sought ________________________________

Total requested from the Kerusso Scholarship Program:

Other sources from which application is being made for financial assistance:
PERSONAL INFORMATION

Applicant’s NAME ____________________________________________

Address ____________________________________________________

City/State/Zip ______________________________________________

Date of Birth _______________________________________________

Last four digits of Social Security Number________________________

Telephone (daytime) _________________________________________

Telephone (evening) _________________________________________

Email address _______________________________________________

Marital Status _______________________________________________

Spouse’s name _______________________________________________

Children (name and ages) ______________________________________

________________________________________________________________

________________________________________________________________

Home Church _________________________________________________

Address _____________________________________________________

City/State/Zip _______________________________________________

Pastor’s Name _______________________________________________

Number of years member _______________________________________

EDUCATION INFORMATION
(Attach additional sheets if necessary)

Applicant’s Name ____________________________________________

High School Attended

Name of School ________________________________

Years Attended ________________________________

Honors/Awards Received __________________________

Colleges Attended (transcripts required)

Name of Institution ________________________________

Address ____________________________________________

City/State/Zip ________________________________

Years Attended ________________________________

Degree(s) Earned

Major/Minor ________________________________

Honors/Awards Received __________________________

Graduate/Seminary Attended (transcripts required)

Name of Institution ________________________________

Address ____________________________________________

City/State/Zip ________________________________

Years Attended ________________________________

Degree(s) Earned ________________________________

Honors/Awards Received __________________________
ACTIVITIES

Applicant’s Name ____________________________________________________________

Please attach an additional sheet(s) describing your:

  Work Experience, including current employment
  Church and Community Activities
  Memberships
  Sports
  Other Interests

PERSONAL TESTIMONY

Please attach an additional sheet(s) describing how you became a believer and your personal relationship with our Lord Jesus Christ.

CALL TO MINISTRY

Please attach an additional sheet(s) describing your call to the ministry and how you feel God has spiritually gifted you.
REFERENCES

Please include all letters of recommendation in sealed envelopes along with your completed application from the following references.

Applicant’s Name __________________________________________________

(1) Pastor

Name ________________________________
Address ________________________________
City/State/Zip ________________________________
Phone ________________________________
Number of years known: ____________________________

(2) Employer

Name ________________________________
Address ________________________________
City/State/Zip ________________________________
Phone ________________________________
Number of years known: ____________________________

(3) Additional Reference(s)  (Not Family)

Name ________________________________
Address ________________________________
City/State/Zip ________________________________
Phone ________________________________
Relationship to applicant: ____________________________
Number of years known: ____________________________
FINANCIAL INFORMATION

Applicant’s Name__________________________________________________________

Estimated total income/resources for the year:

   Personal Savings ________________________________
   Income from employment __________________________
   Spouse’s income ________________________________
   Aid from parents______________________________
   Aid from church ________________________________
   Aid from others ________________________________
   Scholarships/Grants/Loans ________________________
   TOTAL _______________________________________

Anticipated Expenses for the year:

   Tuition and Fees ________________________________
   Books and Supplies ______________________________
   Housing/Rent/Room & Board ________________________
   Clothing ________________________________
   Travel Expenses ________________________________
   Medical Insurance ______________________________
   Children’s education ____________________________
   Personal and Recreation _________________________
   Other Expenses ________________________________
   TOTAL _______________________________________

Total Outstanding Credit Card Debt ________________________

Total Outstanding Student Loans __________________________


The Kerusso Scholarship Fund

STATEMENT OF FAITH

The Kerusso Scholarship Fund’s position of faith is based on the following beliefs:

1) There is but one true God.

2) The Bible is the infallible Word of God delivered to man through Divine Inspiration.

3) Christ is the Son of God and is equal with God and the Holy Spirit and these three are one.

4) The only hope for salvation is faith in the shedding of Christ’s blood as an atonement for sins, Christ’s death on the cross, and Christ’s bodily resurrection.

DECLARATION OF APPLICANT

I have read and understand the instructions, and declare that:

• All information provided is true and complete.

• I will be a student at the institution named for the period stated.

• I will immediately notify The Kerusso Scholarship in writing if I withdraw from studies before completion.

I do, furthermore, hold to the doctrinal statement set forth above without reservation.

I also give my consent to any criminal, credit and/or background checks that may be necessary.

_________________________          ________________
Signature of Applicant          Date