# RULES AND REGULATIONS

# INTERNATIONAL BAPTIST SEMINARY SCHOLARSHIP FUND National Ministries ABC/USA P. O. Box 851 Valley Forge PA 19482-0851

#### I. THE APPLICATION PROCESS

Persons asking for scholarship aid from the *International Baptist Seminary* **Scholarship Fund** are to complete and mail the following documents to the *International Baptist Seminary Scholarship Fund*, at the address on the top of this form:

- Application form
- Financial Statement
- Endorsement Forms (2)
- Statement of Christian Vocation (approximately 100 words with typed name on top of page)

#### II. ELIGIBILITY FOR SCHOLARSHIP AID

- 1. The applicant must be from an ethnic group whose *first* language is other than English and must be preparing for ministry in the United States with that ethnic group.
- 2. Two endorsements for the potential of this ministry must be supplied by an American Baptist pastor, area minister, and/or denominational leader, and/or institution personnel.
- 3. The applicant must be a citizen of the United States or a permanent resident.
- 4. The applicant must demonstrate the need for IBS scholarship assistance to cover educational and related personal expenses, and have the intent and possibility for completion of the course of study.
- 5. The course of study must be pursued at an accredited institution listed in the Higher Education Directory or the Membership List of the Association of Theological Schools unless otherwise approved by the Board.
- 6. The course of study should lead to a degree or certification appropriate to or required by the chosen Christian ministry, M.A., M.T.S., M.Div, or other seminary degree from an accredited seminary. We also offer financial assistance to D.Min and PhD candidates.

#### III. SCHOLARSHIP AMOUNTS

- 1. A scholarship of between a minimum of \$500 and a maximum amount of \$3,000 per academic year is available to full-time students.
- 2. A one-time scholarship of \$1,000 is available to full-time D.Min students. A scholarship of \$3,000 is available to full-time PhD or ThD students after satisfactory completion of the first year of study. A one-time renewal is available.
- 3. Scholarship aid will be granted to summer school students upon application; amounts to be determined in each case.
- 4. Partial scholarship aid will be granted to part-time students; amounts to be determined in each case.
- 5. Funds will be remitted directly to the institution upon certification of enrollment and receipt of transcripts of records. Aid will be disbursed only on a semester-to-semester basis.

In the event there is a change in the student's statues, an immediate notification must be made to the International Baptist Seminary Scholarship Fund.

#### IV MAINTAINING ELIGIBILITY

- 1. The student must maintain a grade point average of "C" or better.
- 2. Students are expected to request a renewal for aid and submit a new financial statement each school year.
- 3. A copy of the grades or a copy of the official transcript shall be sent to the Chairperson of International Baptist Seminary Scholarship Fund at the end of each semester to the address on the front of this application.
- 4. Immediate notification of a change of student status shall be sent to the National Coordinator for Intercultural Ministries Asian Churches Strategist (Use the address on the front of this application.) Chairperson of International Baptist Seminary Scholarship Fund (address as shown on cover letter)

Note: Failure to maintain eligibility will result in withholding of funds and/or loss of scholarship.

## INTERNATIONAL BAPTIST SEMINARY SCHOLARSHIP FUND

National Ministries ABC/USA P. O. Box 851, Valley Forge PA 19482-0851

Application for Scholarship Aid
All documents must be returned to our office by due date indicated on letter sent with this form in order to be considered for current academic year.

RSONAL					
Name					
(Mr. Mrs. Miss	. Title) (I	ast Name)	(First N	lame)	(Male/Female)
			(City)	(State)	(Zip Code)
Permanent Address					
			(City)	(State)	(Zip Code)
Phone Number: Ho	me	Ins	titution	Cell #	
Date of Birth		Age	Single	Married	i
U.S. Citizen	U.S. Peri	manent Reside	ent Cu	rrent Official Stat	us
Of what congregatio	n are you	a member?			
(Name of Congre	egation)	(C	ity)		(State)
List Language Speal	king			Ethnicity	
stating why you Churches, U.S.A UCATION	wish to e l., statin	nter a Christ g which speci	ian Ministry alized field y	related to the A you have chosen	American Bapti
academic achievem		ing the one in	which you are	e now enrolled.	
	ddress	Da: Att	tes <u>ended</u>		Year Degree was obtained
<u>Name</u> A	duress				
	(Mr. Mrs. Miss  Mailing Address	Mailing Address	(Mr. Mrs. Miss. Title) (Last Name)  Mailing Address	(Mr. Mrs. Miss. Title) (Last Name) (First Mailing Address	Mailing Address

10.	Name of institution/seminary you are attending or you plan to attend?					
	Date of enrollment					
	Please indicate if you are: Full-time	or Part-	time			
11.	If already enrolled, please state:					
	Credits already earned:	Credits required for gra	duation:			
	Year you expect to graduate:	_ Graduating degree you	expect to earn:			
FIN	ANCIAL INFORMATION					
12.	Please complete the attached financia	al form and return with th	is application.			
RE	ERENCES:		-			
13.	Please give <u>three</u> references, including staff member of an institution so relate		recognized affiliates, or a			
	Name Add	dress	Phone No.			
	2					
		dress	Phone No.			
	Name Add	dress	Phone No.			
ST	ATEMENT BY APPLICANT FOR AID					
In	naking this application, I affirm					
1	That I have read and understand the Regulations of the International Bapt in good faith.					
2	That the information I have given her	rewith is correct and comp	lete, and			
3	That the aid request is necessary for	me to continue my studies	3.			
4	International Baptist Seminary Schol	larship Covenant				
	In accordance with the purpose state International Baptist Seminary Scho of these financial aid resources given covenant to remain active in an Ame scholarship received. If I fail to comp payment of all scholarship funds.	larship Fund, I hereby Cov n to sustain American Bapt rican Baptist ministry rela	venant to be a good steward tist ethnic leadership. I ted setting for each year of			
sta Ch	rther state that if there should be any tement of my personal, education or final reperson of the International Baptist St 851, Valley Forge, PA 19482-0851.	nancial circumstances, I w	ill promptly notify the			
Da	te:Signature	<u>.                                    </u>				

#### FINANCIAL STATEMENT

<b>Academic Year</b>	from	to	
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### INTERNATIONAL BAPTIST SEMINARY SCHOLARSHIP FUND

Instructions: Student must give estimates for a *full* year from **September 1st to August 31st** of the following year. Include income and expenses for the entire family, if you are married. **Please type or print** in black ink, filling in both sides of this sheet. Keep a copy for yourself. Enter amount in dollars; omit cents.

m	ne and Address of Applicant		e-mail
			ŧ
m	me phone #: ()Cell pho	one #: ()_	
IN	NUAL INCOME: (Do not include income sought through thi	s application)	
	* Please fill with annual financial information	Estimated For this application	For use of financial aid officer
	Income available to you from all sources:		
	<ul> <li>Savings from summer work or other sources that wi be available to you at the beginning of academic year</li> </ul>		
	b. Gross earnings during academic year		
	c. Field education earnings/stipends		
	d. Gross earnings of spouse		
	e. Funds available from parents, relatives, friends		
	f. From local church		
	g. Grants and scholarships from institution you plan to	attend	<u> </u>
	h. Other institutions		
	i. Loans (for information only & will not be counted as	s income)	
	j. Veteran's benefits		
	k. Other income (specify)		
	TOTAL ESTIMATED	INCOME	·
	Mention any aspect of your financial situation of special	alanifiaanaa fan aanaidanati	

ANN	UAL	EXPENSES: (if married, include expenses of total family)		
			Estimated For this application	For use of financial aid officer
3.	a.	Tuition @ \$ per credit (either F.T. or P.T.)	\$	
	b.	Fees (matriculation, library, graduation, etc.)		
	c.	Compulsory health insurance		
	d.	Room (or residence rent, including utilities)		
	e.	Board (or food) including off-campus meals		
	f.	Books and other educational supplies		-
	g.	Clothing, laundry and cleaning		
	h.	Recreation		:
	i.	Incidents		
	j.	Public transportation		
	k.	Medical and dental, not covered by insurance		
	I.	Life insurance	·	
	m.	Contribution to church		
	n.	Child care for working parents		
	ο.	Estimated income taxes and Social Security to be paid on income listed In 1b, c, d		
	p.	Other expenses (please specify)	:	
	q.	Debt from previous years that needs to be paid during academic year		
	r.	Automobile expenses:		j
		(1) Operating cost (includes license, insurance, maintenance, gas)		
		(2) Monthly Payments		1
4.	То	tal expenses (must be larger than estimated income)		
<b>5</b> .	То	tal estimated income from first page	<b>.</b>	
6.	B/	ALANCE (total expenses less total income)	\$	\$

Return Financial Form to: International Baptist Seminary Scholarship Fund National Ministries, P.O. Box 851, Valley Forge, PA 19482-0851

Attn. Kim Wilkins

## TANGORASTAMAN MATAORAN

# INTERNATIONAL BAPTIST SEMINARY SCHOLARSHIP FUND National Ministries ABC/USA P. O. Box 851, Valley Forge PA 19482-0851

The International Baptist Seminary Scholarship Fund (IBS) provides scholarships to seminarians of ethnic heritage who are members of an American Baptist congregation. The student's <u>church pastor</u> or <u>regional staff person</u> that he/she is a member in good standing of a church related to the American Baptist Churches must endorse applicants.

For the reason mentioned above, you are being asked to give endorsement to this candidate who has applied for an IBS scholarship. IBS would like to have your endorsement in its files no later than two weeks after you receive this statement.

We appreciate you helping us decide if this candidate has the necessary qualifications to receive an IBS scholarship. So, please sign this statement and mail it to the IBS address above.

### **ENDORSEMENT**

#### (PLEASE PRINT OR TYPE)

l am endorsing			•
<u> </u>	(Name of applicant)		
am not endorsing _	(Name of applicant)		
	(Name of applicant)		
He/she is a member	of		
Church Address			
	or <b>did not</b> endorse the applicant:		
Explain why you are	or are not endorse the applicant.		
Title			Print Name
1100			7
Date	)	<del></del>	Signature
		( )	
Ema	il Address	· ·	Home/Cell Phone

(Please send the signed form to the address above; keep one in your files)

(Revised April 2009)

# ENDORSEN/ENAPEORN

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(PLEASE PRINT OR TYPE)

am endorsing			
	(Name of applicant)		· · · · · · · · · · · · · · · · · · ·
am not endorsing _	(Name of applicant)		
	(Name of applicant)		
le/she is a member o	of		
Church Address			
	or <b>did not</b> endorse the applicant:		
-	•••		·
		<u>-</u>	
Title	<del></del>		Print Name
Date		<del> </del>	Signature
		( )	
Emai	Address	· · · · · · · · · · · · · · · · · · ·	Home/Cell Phone

(Please send the signed form to the address above; keep one in your files)

(Revised April 2009)