JAMES ELDRIDGE SCHOLARSHIP FUND APPLICATION NORTHWEST OHIO BAPTIST ASSOCIATION PO Box 962, Toledo, OH 43697

Purpose and Limitation:

• James Eldridge Scholarships provide financial assistance to applicants recommended by their own home church and that are affiliated with the Northwest Ohio Baptist Association. Scholarship funds will be awarded directly to colleges, universities, and seminaries.

• A new application is required annually for any additional requests for scholarship funds and is to be recommended and approved by the applicant's pastor. The amount of the scholarship: \$500/per semester; 1 year per application; (2 semesters) Verification of the completion of the 1st semester is required before the 2nd check is released.

Requirements for Receiving NWOBA Scholarship Funds:

1. Applicant shall be a member in good standing of a Southern Baptist Church in affiliation with the Northwest Ohio Baptist Association.

2. Pastor recommendation and approval will verify that the applicant is worthy and needs financial assistance in regard to the requested scholarship.

3. Applicant must maintain good academic standing.

Criteria for Granting Scholarships:

Scholarships will be granted after financial needs are verified. The following criteria will determine distribution priorities:

FIRST PRIORITY:	Applicants preparing for Christian service or currently serving in SBC Christian vocations (i.e. pastor, church ministry staff, church planting missionaries, or other SBC related ministry positions).
SECOND PRIORITY:	Other applicants who are children of those in Christian-related vocations and face difficult financial circumstances that would justify making a request.
THIRD PRIORITY:	When possible, applications may also be considered from other applicants whose need is justifiable (especially in emergency circumstances); but, does not meet the criteria for first or second priority funding.

Documents to be Submitted Along With Completed Application:

1. A letter of recommendation from the applicant's current pastor, or if applicant is a pastor, from their Associational Missionary.

2. An enrollment confirmation letter from the educational institution's business office stating that applicant is enrolled and taking classes and containing the student ID number.

These documents, along with a completed application, must be received by NWOBA before a scholarship application can be considered.

Procedure for Requesting and Administering Scholarships:

• Upon completion, this application is to be dated and forwarded to SCHOLARSHIPS, Northwest Ohio Baptist Association, PO Box 962, Toledo, OH 43697 419-243-1255

• Completed applications will be accepted in the NWOBA office by June 1 prior to a scheduled Leadership Council meeting. The Leadership Council will review each application and make a decision by August 1

• All applications must be officially acted upon at a regular meeting of the Leadership Council.

• After an application is approved by the Leadership Council, scholarship funds will be sent to the designated institution and credited to the students account. The applicant will be informed of this action.

		Date:
Full name of applicant:		
Street Address:		
		Zip code:
Phone Number:	E-Mail Address:	
Age: Date of birth:		
Name of NWOBA Church where you have	e Membership:	
	City	/:
Educational Institution you plan to attend	d:	
Mailing Address:		
City:		
Admissions Office phone number:		_
Your Student ID #		
(b) Are you preparing for vocational Chris Please explain and be specific for (a) and,	-	NO UNDECIDED
Please explain and be specific for (a) and, Please make note: The enrollment confir dates.	/or (b) above.	your school, must state these same term
Please explain and be specific for (a) and, Please make note: The enrollment confir dates. You will be a: Freshman Sophomore	/or (b) above. mation letter from y	your school, must state these same term
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Agreement of Applicant

I understand and agree that aid hereby applied for, if granted, is conditioned upon the scholastic requirements contained in the catalog of the institution I will attend. I agree to notify the Northwest Ohio Baptist Association and to repay the amount appropriated on my behalf if I should leave school or discontinue my studies during the term for which the scholarship is granted.

Facts as stated in this application are correct to the best of my knowledge. Scholarship funds are requested because there is genuine need for assistance.

Signature of applicant:	Date:
<u>Certification Statement of Parent or Guardian</u> (if under 18	
Signature of Parent or Legal Guardian:	
Date:	
Pastor Approval	
Applicant's Church:	
• I have examined the scholarship application of and hereby approve and recommend that he / she be grant Ohio Baptist Association James Eldridge Scholarship Fund. I and has a genuine need for financial assistance.	ed financial assistance from the Northwest
Signature of Pastor	Date:
If applicant is a Pastor, Signature of Associational Missionar	Date:
Certification of the Leadership Council of the Northwest Ohio Baptist A	ssociation
The Leadership Council voted on to grant an academic	scholarship to
in the amount of \$ for the year 20 at (School)	
Clerk:	
The amount of the scholarship: \$500/per semester; 1 year per applicatio Verification of the completion of the 1st semester is required before the	

Verified by: _____ Date: _____