

John and Peg Slusher Ministry Scholarship

All applications and required documentation must be postmarked by March 15. Late or incomplete applications cannot be accepted by the Foundation so please follow all application requirements carefully.

Requirements:

Applicant must be a member in good standing of the First United Methodist Church of Marion, Iowa with secondary consideration given to members of churches in Linn County, IA.

Applicant must display a clear intent of entering Christian Ministry.

First preference will be given to applicants who have completed or are in their final year of completing a bachelor's degree and enrolled in or are preparing to enroll in a course of study at a seminary approved and recognized by the United Methodist University Senate and/or the United Methodist Board of Higher Education and Ministry or their successors.

Second preference shall be given to students enrolled in an accredited college or university, must be classified as a junior or above, and able to demonstrate a clear intent of entering full-time Christian ministry.

No award shall be made to those classified as a freshman or sophomore.

Applicant must provide verification of church membership.

Applicant must provide transcript to date.

Applicant must provide a narrative of the personal call to ministry and involvement in the Church and wider Christian community.

Personal:

Name: _____

Permanent Address: _____

City, State, Zip: _____

Email: _____ Birth date: _____ Home Phone: _____

US Citizen: _____ If No, Where? _____ Marital Status: _____

Dependent Children: _____ Ages: _____

Church Affiliation:

Church Name: _____ How Long? _____

My pastor's signature below verifies my membership and/or that I have been nominated by my church's Ad. Board Council.

Name: _____ Signature: _____

District: _____ Church Address: _____

City, State, Zip: _____ County: _____

Education:

Expected College Graduation Date: _____ GPA: _____

College Name: _____

Seminary Name: _____

Planned Seminary Enrollment Date: _____

Area of Study: _____ Type of Seminary Degree Sought _____

Accepted? _____ Full Time? _____ Attending Full Year? _____

If No, Please Explain _____

Vocation:

What career are you preparing for? (If undecided list top three choices)

Activities and Interests:

Statement of Applicant:

I certify that the information given on this application is true, correct and complete to the best of my knowledge.

Signature: _____ Date: _____

Submit application and all required materials by March 15th to:

Iowa United Methodist Foundation
2301 Rittenhouse Street
Des Moines, IA 50321

John and Peg Slusher Ministry Scholarship
Financial Need Analysis
(From most recent tax return)

Dependant Student (use parents income)

Mother's Name: _____

Father's Name: _____

Independent Student: (use own income, if married include spouse)

Total household annual income before taxes: _____

Number of children in your family (include self if applicable): _____

Number of children claimed as dependants (include self if applicable): _____

Number of dependants in college next year: _____

Medical and dental expenses not paid by insurance: _____

Emergency Expenses (Flood damage, etc.) _____

Total value of bank accounts and other investments (stocks/bonds, etc.) _____

Amount of scholarships and other financial aid already received: _____

Anticipated educational expenses (fees, tuition, books, room, board, etc) _____

Will it be necessary to borrow to cover your expenses? _____

Additional people dependant on persons income: _____

Unusual circumstances?

Statement of Applicant:

I certify that the information given on this application is true, correct and complete to the best of my knowledge.

Signature: _____ Date: _____