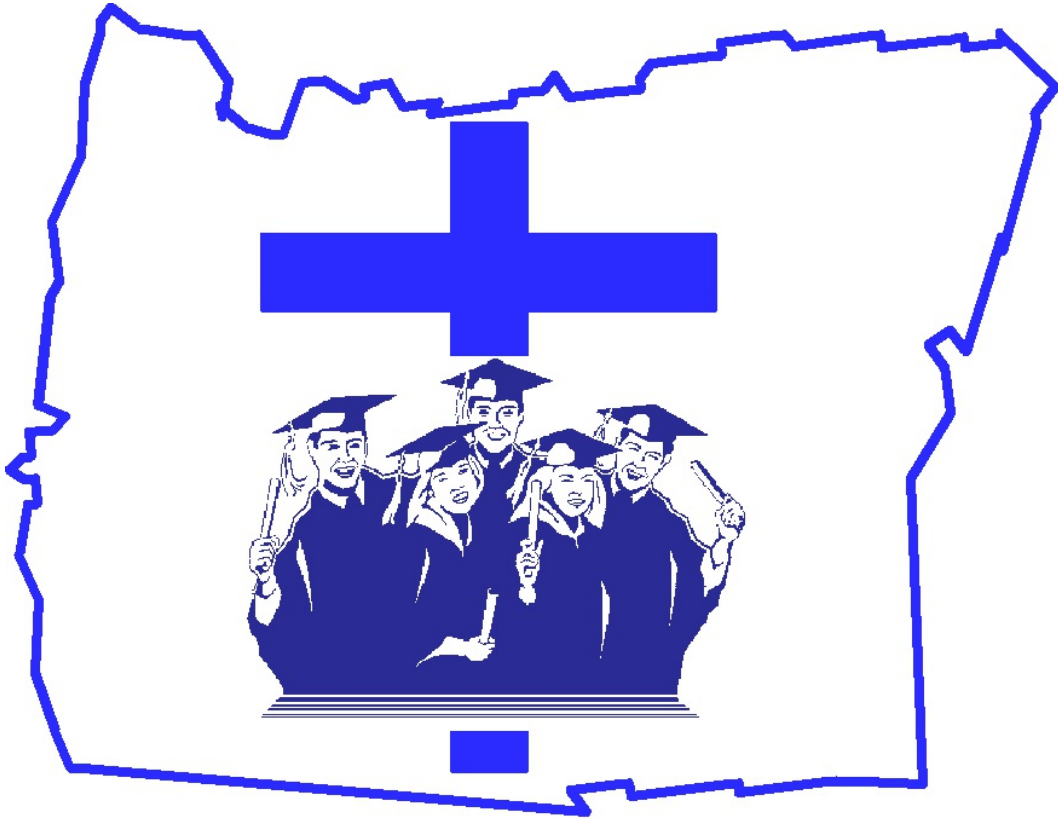


Scholarship Application Packet



"Scholarships for Students Preparing for Christian Ministry"

Alexander Christian Foundation
4742 Liberty Road S. #112
Salem, Oregon 97302

Email: info@acfo-online.org
Website: www.acfo-online.org

The Alexander Christian Foundation of Oregon is a non-profit charitable organization established in 1992 for the purpose of granting scholarships and other financial assistance for the Christian education of students who are members of the Independent Christian Church/Church of Christ in Oregon. Foundation support comes from individual Christians and churches. It is our prayer that of the students aided by the Foundation will soon be serving in ministries or mission field throughout the world.

STIPULATIONS FOR RECEIVING AN ALEXANDER CHRISTIAN FOUNDATION SCHOLARSHIP

A recipient of an ACF Scholarship must:

- be a member of the Christian Church/Church of Christ (Independent) in the State of Oregon,
- be one who desires to serve in a church-related vocation,
- be a candidate for a church related vocation or one who is currently pursuing such a course,
- attend a school affiliated with the Christian Churches/Churches of Christ (as listed in the *Directory of the Ministry*),
- have a cumulative GPA of at least 3.00.

To be considered for the Director's Scholarship, Juniors, Seniors, and graduate students must:

- be a previous scholarship recipient,
- have a cumulative GPA of 3.25 or higher,
- be actively involved in a ministry (church, mission, internship, etc.),
- have a recommendation from someone who oversees their ministry AND from a school professor or administrator,
- submit a statement of their ministry goals.

PROCEDURE FOR APPLYING FOR AN ALEXANDER CHRISTIAN FOUNDATION SCHOLARSHIP

1. Recipients of scholarship aid from the Alexander Christian Foundation will be selected by the Board of Directors of that Foundation.
2. The applicant for scholarship aid will use the following application procedure:
 - a) The application will be completed by the candidate and submitted to the Directors of the Alexander Christian Foundation on or before April 1st.
 - b) The application will be accompanied by:
 - (1) a 500 to 1,000 word essay on the subject, "Why I Desire to Serve Christ in a Church Related Vocation."
 - (2) a copy of transcript of high school grades and college grades if in college.
 - (3) a photograph of the applicant.
 - c) Have an evaluation of the applicant's character and motivation/direction from the home church minister mailed directly to the Foundation office.
 - d) Have an evaluation of the applicant's character and motivation/direction from an elder of the church mailed directly to the Foundation office.
 - e) Only those applications that are completely filled out and meet all requirements will be considered.
3. The applicant will be advised of the decision of the Board of Directors of the Foundation concerning his or her application by June 1st. It will be the intention of the Foundation also to notify the scholarship recipient's home school and church of his/her Alexander Christian Foundation award.
4. The student considered for final selection for the basic grant may be required to attend an interview session prior to final selection.
5. Mail your application to **ACF, 4742 Liberty Road S. #112, Salem, OR 97302-5000.**



| Section A: Introductory Information | |
|--|--|
| Date: _____ | |
| Name: (last, first, middle) _____ | |
| Address: _____ | |
| City, State, Zip: _____ | |
| Home Phone: _____ | |
| Home Church: _____ | |
| Address: _____ | |
| City, State, Zip: _____ | |
| Church Phone: _____ | |

| Section B: Personal Information | | | |
|--|--|-----------------------|--|
| <input type="checkbox"/> Male <input type="checkbox"/> Female | Date of Birth: _____ | Place of Birth: _____ | |
| <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced | Name of Spouse: _____ | | |
| Number of children and ages: _____ | Is anyone dependent upon you for financial support? <input type="checkbox"/> Yes <input type="checkbox"/> No Number _____ | | |

| Section C: Family Background (complete if under 24 years of age and unmarried) | | |
|---|--|---|
| Name of Father: _____ | Name of Mother: _____ | |
| Occupation: _____ | Occupation: _____ | |
| Home Address: _____ | Home Address: _____ | |
| City, State, Zip: _____ | City, State, Zip: _____ | |
| No. of brothers and/or sisters at Home: _____ | If any, how many other college students are supported by your parents? _____ | Name of Legal Guardian, if other than parent: _____ |
| Address of Legal Guardian: _____ | | |

| Section D: High School Educational Experience | |
|---|---|
| Name of High School: _____ | Date Graduated: _____ |
| Address: _____ | Cumulative Grade Point Average: _____ |
| List High School honors received (describe basis of award): | List any High School organizations, athletic teams, etc., of which you were a member: |

Section E: College Educational Experience

| | | | |
|---|----------|--|---------------------------------|
| Have you attended any colleges? <input type="checkbox"/> Yes <input type="checkbox"/> No | | If yes, list chronologically below: | Cumulative Grade Point Average: |
| College: | Address: | | Years attended: |
| College: | Address: | | Years attended: |
| Do you have any degrees from any colleges? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list college, degree, and year earned: | | List any college honors, awards, prizes, etc., you have received and honor societies to which you have been elected: | |

Section F: Financial Information

| | | |
|--|--|--|
| Estimate cost of education for one year: | | Do you have access to any other scholarships or financial assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify source and amount: |
| Tuition \$ _____ Room/Board \$ _____ Food \$ _____ Other \$ _____ (Specify) _____ | | |
| Will your home church provide any funds for your education? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what probable amounts will be given? | | How will your plans be affected if you do not receive an ACF scholarship? |
| 1st yr \$ _____ 2nd yr \$ _____ 3rd yr \$ _____ 4th yr \$ _____ | | |
| Will you be involved in a work-study program? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| To what level can you participate toward your own educational expense? | | |

Section G: Career Choice

| | |
|---|--|
| What area of ministry will you be preparing for? <input type="checkbox"/> Preaching <input type="checkbox"/> Youth <input type="checkbox"/> Missions <input type="checkbox"/> Christian Education <input type="checkbox"/> Counseling <input type="checkbox"/> Music <input type="checkbox"/> Other _____ | |
| What is the college or seminary in which you prefer to enroll for your education? | If a scholarship is not available at a college or seminary of your preference, would you consider attending another? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 1st preference: | Name of college or seminary: |
| 2nd preference: | |
| In what capacities have you served in your home church? | Have you served any churches as a minister or in any other salaried capacity? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list church and capacity below: |

I understand that my photo and essay may be used for publicity purposes and hereby grant my release and permission to use my essay and/or photo as considered appropriate by the Alexander Christian Foundation, and any and all scholarships are awarded at the sole discretion of the Board of Directors of the Alexander Christian Foundation.

(Signature)

Alexander Christian Foundation Minister's Evaluation

| | |
|---|---|
| <p>TO THE APPLICANT: Print your name and address below. This evaluation will be used in determining scholarship awards. You should provide a stamped envelope addressed to the ACF for the person completing this form. Please give your minister an enclosed ACF brochure so he may be informed about this ministry.</p> <p>Name: _____ Date: _____</p> <p>Address: _____ _____</p> <p>Signature: _____</p> <p><i>(By signing above you waive your right of access to see this evaluation.)</i></p> | <p>TO THE MINISTER: The named applicant is applying for a scholarship through the Alexander Christian Foundation of Oregon and is asking you to furnish an evaluation of his/her character and direction. Please complete this form and mail it prior to the April 1st deadline.</p> <p>Name: _____ Date: _____</p> <p>Church: _____</p> <p>Address: _____ _____</p> <p>Signature: _____</p> |
|---|---|

1. How long have you known the applicant?

2. How well do you know the applicant?

Very Well Well Casually

3. What is your opinion regarding the aptitude of the applicant for further academic work?

Highly Enthusiastic Strong Moderate
 Hesitant Negative No Knowledge

4. Does the church provide any financial support to students? Yes No
If yes, please outline the church's policy for granting financial help to students.

CATEGORY: CHARACTER (Check appropriate box)

| | Excellent | Good | Average | Poor | Unacceptable |
|----------------------------------|-----------|------|---------|------|--------------|
| Christ-like morals | | | | | |
| Leadership among peers | | | | | |
| Ability to get along with others | | | | | |
| Follows instructions of leaders | | | | | |
| Respects church leadership | | | | | |
| Ability to make decisions | | | | | |
| Perseverance at tasks | | | | | |
| Has earned respect of others | | | | | |

PERSONAL COMMENTS: _____

FOR COMMITTEE USE ONLY
 Total points divided by categories _____

CATEGORY: DIRECTION/MOTIVATION (Check appropriate box)

| | Excellent | Good | Average | Poor | Unacceptable |
|--|-----------|------|---------|------|--------------|
| Goal-oriented; does not jump from one thing to another | | | | | |
| Probability of completing college through graduation | | | | | |
| Consistent desire to train for the ministry | | | | | |
| Commitment to Christian vocation | | | | | |
| Past involvement in Christian ministry | | | | | |
| Attendance at church functions | | | | | |
| Response to ministry role models | | | | | |
| Aptitude for specialized Christian service | | | | | |

PERSONAL COMMENTS: _____

FOR COMMITTEE USE ONLY
 Total points divided by categories _____

Alexander Christian Foundation Elder's Evaluation

| | |
|--|--|
| <p>TO THE APPLICANT: Print your name and address below. This evaluation will be used in determining scholarship awards. You should provide a stamped envelope addressed to the ACF for the person completing this form. Please give your elder an enclosed ACF brochure so he may be informed about this ministry.</p> <p>Name: _____ Date: _____</p> <p>Address: _____ _____</p> <p>Signature: _____</p> <p><i>(By signing above you waive your right of access to see this evaluation.)</i></p> | <p>TO THE ELDER: The named applicant is applying for a scholarship through the Alexander Christian Foundation of Oregon and is asking you to furnish an evaluation of his/her character and direction. Please complete this form and mail it prior to the April 1st deadline.</p> <p>Name: _____ Date: _____</p> <p>Church: _____</p> <p>Address: _____ _____</p> <p>Signature: _____</p> |
|--|--|

1. How long have you known the applicant?

2. How well do you know the applicant?

Very Well Well Casually

3. What is your opinion regarding the aptitude of the applicant for further academic work?

Highly Enthusiastic Strong Moderate
 Hesitant Negative No Knowledge

4. Does the church provide any financial support to students? Yes No
If yes, please state what, if any, financial help will be given to the applicant.

CATEGORY: CHARACTER (Check appropriate box)

| | Excellent | Good | Average | Poor | Unacceptable |
|----------------------------------|-----------|------|---------|------|--------------|
| Christ-like morals | | | | | |
| Leadership among peers | | | | | |
| Ability to get along with others | | | | | |
| Follows instructions of leaders | | | | | |
| Respects church leadership | | | | | |
| Ability to make decisions | | | | | |
| Perseverance at tasks | | | | | |
| Has earned respect of others | | | | | |

PERSONAL COMMENTS: _____

FOR COMMITTEE USE ONLY
 Total points divided by categories _____

CATEGORY: DIRECTION/MOTIVATION (Check appropriate box)

| | Excellent | Good | Average | Poor | Unacceptable |
|--|-----------|------|---------|------|--------------|
| Goal-oriented; does not jump from one thing to another | | | | | |
| Probability of completing college through graduation | | | | | |
| Consistent desire to train for the ministry | | | | | |
| Commitment to Christian vocation | | | | | |
| Past involvement in Christian ministry | | | | | |
| Attendance at church functions | | | | | |
| Response to ministry role models | | | | | |
| Aptitude for specialized Christian service | | | | | |

PERSONAL COMMENTS: _____

FOR COMMITTEE USE ONLY
 Total points divided by categories _____

Alexander Christian Foundation

Request for Academic Transcript

(Please Print)

School: _____

Address: _____

City/State/Zip: _____

Student's Name: _____

Address: _____

City/State/Zip: _____

Mail transcript to: ACF Scholarship Committee
4742 Liberty Road S #112
Salem, Oregon 97302-5000

Today's Date ____/____/____

Years Attended: _____

Year Graduated: _____

Former Name or Names:

Birth date: ____/____/____

S.S. #: ____-____-____

Student Signature:

Alexander Christian Foundation

Request for Academic Transcript

(Please Print)

School: _____

Address: _____

City/State/Zip: _____

Student's Name: _____

Address: _____

City/State/Zip: _____

Mail transcript to: ACF Scholarship Committee
4742 Liberty Road S #112
Salem, Oregon 97302-5000

Today's Date ____/____/____

Years Attended: _____

Year Graduated: _____

Former Name or Names:

Birth date: ____/____/____

S.S. #: ____-____-____

Student Signature:

EXPLANATION OF SCHOLARSHIP AMOUNTS

1. The Basic Grant - \$500

The Basic Grant scholarship is awarded for one year, but not to exceed four years for undergraduate studies at a Christian college. This Basic Grant is to be applied toward tuition, room and board, fees, or other costs payable to the institution. Once a student is awarded a Basic Grant, he/she need not re-apply. The ACF does require a statement from the student indicating their intent to enroll in school each year along with a transcript of grades.

2. Other Grants

Other Scholarships may be awarded in various amounts as determined by the Directors and upon availability of funds. Once a student is awarded a Grant, he/she need not re-apply. The ACF does require a statement of enrollment along with a transcript of grades from the student each year.

3. Availability

Awarding of all Grants is subject to availability of funds and eligible applicants.

STIPULATIONS FOR TERMINATING AN ALEXANDER CHRISTIAN FOUNDATION SCHOLARSHIP

1. The stipulations for receiving an Alexander Christian Foundation scholarship are binding throughout the recipient's education for his church-related vocation. The Directors of the Foundation reserve the right to terminate the scholarship if a majority of them feel that the recipient is not respecting and fulfilling those stipulations.
2. The Directors of the Foundation reserve the right to terminate a scholarship for what a majority of them believe to be academic incompetence; immorality or unbecoming conduct on the part of the recipient; or a change of studies/major to a non-church-related vocation.