



# EMC Missions Scholarship

## APPLICATION FORM

Name of Applicant \_\_\_\_\_

Complete Address \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Number of credit hours completed at RMC by the end of the Fall Semester of the current year \_\_\_\_\_

Length of time you have attended an Evangelical Missionary Church \_\_\_\_\_

Which EMC church are you a member of? \_\_\_\_\_

Church Name	City	Province/State
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### Description and Criteria

Two scholarships of \$500 each are offered annually. The recipient must be a member of an Evangelical Missionary Church and have a definite call to missionary service.

### Application Requirements

1. You have completed at least 30 hours at RMC by the end of the Fall semester of the award year.
2. You must be interviewed and affirmed by a World Partners Official to support your pursuit of your chosen ministry and have that official fill out the attached form.
3. As well, you must submit two personal references on copies of the attached form.
4. You must be a member of an EMC church.

Ensure your application is submitted to the Academic Office by **March 15<sup>th</sup>** in an envelope addressed to the following or FAX to (403) 220-9567.

Rocky Mountain College  
 Attention: Scholarship Committee  
 4039 Brentwood Rd NW  
 Calgary AB T2L 1L1

***For Office Use Only:***

Date Received \_\_\_\_\_

Response:     Awarded     Not Awarded                      Date Student Notified \_\_\_\_\_

Signature of Scholarship Committee Chairperson \_\_\_\_\_



APPLICANT'S PERSONAL REFERENCE FORM

\_\_\_\_\_ (*Name of applicant*) has applied for the Evangelical Missionary Church of Canada Missions Scholarship. This scholarship is offered to students applying for their 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> year of a missions degree at Rocky Mountain College. It is intended for students who have a definite call from the Lord to ministry in missions. We have been referred to you for information concerning his/her character and fitness for such an award. Your reply will be kept in strict confidence.

1. How long and in what capacity have you known the applicant?

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2. How does the applicant demonstrate wisdom in their interaction with:

- a) Members of the opposite sex?
- b) People of other ethnic origins?
- c) People of other age groups/social groups?

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3. In what ways has the applicant demonstrated consistent Christian living? If this does not mark their life, please explain what you have seen.

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4. Does the applicant demonstrate a genuine love for people leading to an earnest Christian witness and/or counsel? Please explain.

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5. Does the applicant express sound doctrinal beliefs and live a worshipful, Spirit-filled life? Explain any concerns you have in these areas.

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6. Would you affirm this student's receipt of this Scholarship?

\_\_\_\_\_ Yes      \_\_\_\_\_ Yes, with reservation      \_\_\_\_\_ No

Name of person completing form (please print)_____
Signature_____
Date:_____

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6. Would you affirm this student's receipt of this Scholarship?

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Signature_____
Date:_____

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## APPLICANT'S REFERENCE FORM

To be completed by a World Partners Official

I have met with \_\_\_\_\_ and: (please check one)

Name of Applicant

\_\_\_\_\_ Affirm this student receiving an EMC Missions scholarship at this time

\_\_\_\_\_ Affirm with reservation, this student receiving an EMC Missions scholarship at this time.

\_\_\_\_\_ Do not feel this student should receive an EMC scholarship at this time.

\_\_\_\_\_ Date \_\_\_\_\_

Signature- Missions Director (or representative)

Add any comments pursuant to your decision below.

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Please submit this form to the Student Services office by **March 15<sup>th</sup>**, in an envelope addressed to the following or send by fax to 403-220-9567:

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 Calgary AB T2L 1L1