ME_RGB_TAG.eps

**Next Generation Christian Leaders Scholarship:**

**Application Form**

|  |  |
| --- | --- |
| **Contact Information** | |
| **Applicant Name:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |
| **School Information** | |
| **Name of High School or College/University:** |  |
| **High School Graduation Date:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **Declared/Intended Major:** |  |
| **Intended Graduation Date:** |  |
| **Short Response** | |
| **Please describe your involvement at your local church and/or in a local ministry (be sure to include the name of the church and/or ministry):** |  |
| **Please describe your leadership experience in ministry, as well as any notable achievements:** |  |
| **Please share why you feel called to ministry in the former Soviet Union/Eurasia:** |  |
| **Please share why you are applying for the NGCLS, and how it would help you to pursue leadership in ministry:** |  |
| **Please share how you plan to continue serving in ministry after you graduate from college:** |  |

I have read and understand the conditions of the Next Generation Christian Leaders Scholarship from Mission Eurasia. I affirm that I am planning to be involved in ministry related to the former Soviet Union/Eurasia.

I give permission to the officials of my educational institution to release my academic transcripts and other information requested for consideration of the scholarship program. I understand that this application will be available only to qualified people who need to review it in the course of their duties. I affirm that all the information contained in the application is true and accurate, to the best of my knowledge and beliefs. I give Mission Eurasia full rights to publish my name, place of residence (city, state, and country only), the name of the college I attend, and the photographs I have provided.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please mail this completed application form, along with all of the other required documents, in one envelope to:

Mission Eurasia

Attn: NGCLS

P.O. Box 496

Wheaton, IL 60187