

SCHOLARSHIP APPLICATION

Office of Financial Aid

Name	of Scholarship that you a	are applyir	ng for:		-
Student Name:				Date:	
Address:			_ City:	State:	Zip:
Email A	ddress:				
1.	Current Degree of Study				
2.	Anticipated Graduation Date				
3.	Are you currently a pastor of a church or involved in ministry () Yes() No?				
	If yes, please specify:				
4.	 Describe your current ministry work and anticipated plans after graduating from BTS? (You may attach separate sheet with details.) 				
5.	Family Status: ()Singl				
6. Family Household Income (monthly) \$					
	Current Debt (monthly – home, education, credit card) \$				
7.	Dependents:				
	Name	Age	Relationship	Name of school/	college attending
Signatu	ıre:			_	
Be sure to include attachments applicable to this application. Office Use Only: Current Financial Aid begin received:					

Student Loans

BTS Grants