

## WOMAN'S MISSIONARY UNION OF VIRGINIA

P. O. Box 8435, Richmond, VA 23226      2828 Emerywood Parkway, Richmond, VA 23294  
Telephone: 804-915-5000 or -800-255-2428      Fax: 804-672-8008  
Email: [wmuv@wmu-va.org](mailto:wmuv@wmu-va.org)      Website: [www.wmu-va.org](http://www.wmu-va.org)

# CAMP STAFF SCHOLARSHIPS

## Qualifications and Guidelines

**Woman's Missionary Union of Virginia (WMUV) has established college and graduate school scholarship grants to staffers who serve during summer camp at CrossRoads.**

*Priority for scholarship aid will be given to students who are members of churches served by the Baptist General Association of Virginia (BGAV).*

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***A maximum of \$7,000 is available each year for college scholarship grants for Camp Staff.***

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1. Camp staffers must be serving as a staffer at CrossRoads when they apply.
2. Staffers must be actively involved in church and/or Baptist Student Union or Collegiate ministries.
3. The following factors will be considered:
  - a. evidence of Christian commitment
  - b. performance as a staff member
  - c. need for financial aid
  - d. grade point average of B or better
  - e. previous involvement in Girls in Action, Royal Ambassadors, Children in Action, Acteens, Challengers, and/or Youth on Mission
4. Camp staffers will be eligible for scholarships of differing amounts depending on the number of years served as a staffer and compliance with other guidelines. Staffers who are receiving the Seminary or Seminary Internship scholarships are not eligible.
5. Camp staffers must apply for aid each summer for a one-time gift for the fall academic year. Returning staffers will be given priority. Applications must be completely filled out and returned to the camp director by July 1.
6. As a condition of receiving the scholarship, Applicants are required to write a 500 word statement of how the scholarship impacted their life, and submit it to the WMUV.
7. Applicants must be recommended by the camp director and be interviewed by a representative(s) of the CrossRoads Commission, the Executive Director/Treasurer (or representative), or representative(s) of the Board of Trustees of WMUV.
8. Scholarships will be determined by the above personnel and submitted to the Board of Trustees for final approval at their next meeting. Recipients will be notified of the amount of scholarship by letter and checks will be sent to the appropriate college or seminary.
9. Candidate shall be endorsed by the Board of Trustees of WMUV.

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**CAMP STAFF SCHOLARSHIP APPLICATION**  
**CrossRoads Camp & Conference Center**

Name _____	Date _____
Home Address _____	City/State/Zip _____
Birthdate _____	Social Security Number _____
Home Telephone _____	Cell Telephone _____
E-mail _____	Church Membership _____
Association _____	Church Address _____ <i>Church Name</i>

**College** \_\_\_\_\_

**College Address** \_\_\_\_\_ *Must be completely filled out*      **City/State/Zip** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**College Year (this fall - check one):**    \_\_\_ Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior

**Year you plan to graduate** \_\_\_\_\_      **Grade Point Average (if applicable)** \_\_\_\_\_

**Major** \_\_\_\_\_      **Minor** \_\_\_\_\_

I have worked at CrossRoads \_\_\_\_\_ complete summers.

**Positions held at camp:** \_\_\_\_\_

If you have worked at other camps, please list: \_\_\_\_\_

**Will you be employed during the coming year?**      \_\_\_\_\_ yes/no  
If yes, where \_\_\_\_\_

**List all grants, scholarships or loans you will be applying for or receiving this coming year.**

<u>Name</u>	<u>Amount</u>	<u>Receiving/Applying</u>
_____	_____	/
_____	_____	/
_____	_____	/

Attach an additional sheet of paper if you need additional space.

**List missions organizations you have been involved in:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Write a brief statement of your current involvement in church, B.S.U. or other Christian outreach:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If you are returning to CrossRoads, what influenced your decision? How have your camp experiences strengthened your lifestyle?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Career Goals:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How can WMU of Virginia enable you to more effectively serve Christ?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**As a condition of receiving this scholarship, I agree to write a story for the WMUV (500 words or more) of the impact this scholarship has made in my life, and send it to the WMUV c/o Summer Staff Scholarship, PO Box 8435, Richmond, VA 23226 NO LATER THAN SEPTEMBER 1.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date