

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: wmuva@wmu-va.org Website: www.wmu-va.org

ELSIE GILLIAM NURSING SCHOLARSHIP

Qualifications and Requirements

The Elsie Gilliam Nursing Scholarship to the Virginia Baptist Hospital School of Nursing was established in 1968 by a gift from the State Missions Thank Offering in memory of Elsie Gilliam. Elsie Gilliam was a missionary to China and trustee of the WMU Training School. In 1987, the Executive Board of Woman's Missionary Union of Virginia (WMUV) recalled the scholarship when the nursing school closed at the Virginia Baptist Hospital. WMUV then established a nursing scholarship fund in her memory.

Scholarships shall go to Virginia Baptist nurses to do volunteer mission work in another country.

1. Applicants for the Elsie Gilliam Nursing Scholarship shall desire to serve the Lord, utilizing their gifts, as a volunteer nurse in international service.
2. Applicants must hold a current Virginia State nursing license in good standing and be a current member of an active Baptist General Association of Virginia (BGAV) church.
3. The request for an applicant to serve internationally must originate from the country and be approved by the Coordinating Mission Team of the Virginia Baptist Mission Board (VBMB) or a Board of Trustees of WMUV approved mission entity.
4. Volunteer service may include short-term or long-term projects.
5. Applications should be received in the state office of the WMUV 120 days before the desired date of service.
6. One scholarship per year, up to \$800, will be available as funds permit.
7. WMUV reserves all rights to approve or disapprove an applicant's service area or project.
8. As a condition to receiving the scholarship, the applicant is required to write a 500 word story of how the scholarship impacted their life and send it to the WMUV.
9. It is the applicant's responsibility to schedule an interview with the Executive Director/Treasurer, Parish Nurse Consultant, Adult Missions Coordinator or a representative from Board of Trustees of WMUV.
10. The applicant must be approved by the Board of Trustees of WMUV.

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ELSIE GILLIAM NURSING SCHOLARSHIP APPLICATION

Date _____

Name _____

Address _____

_____ (City) _____ (State) _____ (Zip)

Social Security Number _____

Telephone Number _____

Member at: Church _____ Association _____

Church Activities _____

College/Nursing _____ Degree _____

School _____ (Name) _____ (Address)

Member of Virginia Baptist Nursing Fellowship ____ Yes ____ No

Place of Intended Volunteer Service _____ (Country)

Date _____ Length of Stay _____

Anticipated Cost of Trip _____

Request for service is through:

- _____ International Mission Board, SBC
- _____ Missions Mobilization (Virginia Baptist Mission Board)
- _____ Cooperative Baptist Fellowship
- _____ Other
- _____ (specify): _____

DESCRIPTION OF REQUEST: _____

(over)

References:

PASTOR _____ Church _____

Telephone _____

Address _____

(City)

(State)

(Zip)

WMU DIRECTOR _____

How long known? _____

Telephone _____

Address _____

(City)

(State)

(Zip)

Write a brief mission statement on your anticipated volunteer service:

I agree that the scholarship will be used for the purposes stated in this Application. 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.

Signed _____

It is the applicant's responsibility to schedule an interview with the Executive Director/Treasurer and or a representative(s) of the Scholarship Committee of Woman's Missionary Union of Virginia. Please call 1-800-255-2428 or 804-915-5000 to schedule an appointment.