

WOMAN'S MISSIONARY UNION OF VIRGINIA

P. O. Box 8435, Richmond, VA 23226 2828 Emerywood Parkway 23294

Telephone: 804-915-5000 or -800-255-2428 Fax: 804-672-8008

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

SEMINARY SCHOLARSHIP

Qualifications and Guidelines

Woman's Missionary Union of Virginia (WMUV) will grant scholarships to women who are members of churches served by the Baptist General Association of Virginia (BGAV) who plan to attend any of the seminaries supported through the BGAV.

No more than five (5) scholarships per academic year will be available.

1. Applicant's stated purpose is to prepare and to seek career missionary or professional employment with a state or national Woman's Missionary Union, or professional ministry position (state, association or church).
2. The applicant holds a Bachelors degree or its equivalent.
3. The application for aid is made through the WMUV office to the WMUV Board of Trustees prior to January 31.
4. The applicant has appeared before the Executive Director/Treasurer or a representative of the WMUV Board of Trustees. It is the responsibility of the applicant to schedule an interview during November or December of the preceding school year.
5. The applicant signs a note for the amount of money received as a scholarship for the year.
6. The maximum loan granted to the applicant for a full academic year shall be \$500; the applicant shall receive no more than three annual loans. A recipient of the Seminary Scholarship Internship shall be eligible for a fourth-year loan.
7. The recipient of a loan(s) will have all financial obligations canceled when appointed a minimum of two years under the WMUV Board of Trustees approved service entities.
8. The seminary scholarship becomes a loan if the applicant does not assume a professional ministry role as previously described and approved by the WMUV Board of Trustees. It is the responsibility of the recipient to inform WMUV of any address change immediately.

The payment on loan(s) shall begin no later than one (1) year after the recipient completes degree and leaves school, unless the recipient is actively seeking appointment. The repayment amount shall be at least \$25 per month.

The payment on loan(s) shall begin no later than 60 days after leaving school if applicant decides not to seek employment as above stated and/or leaves school before completion of degree.

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Seminary Scholarship

9. Requests for renewal should be made through the state WMUV office prior to January 31. A transcript of the last semester's grades must accompany the request. An average or above average grade is required for renewal.
10. As a condition to receiving the scholarship, the applicant is required to write a 500 word story of how the scholarship impacted her life and send it to the WMUV.
11. The recipient agrees to remain in contact with the WMUV office during her schooling and until all financial obligations are canceled or the conditions of agreement are fulfilled.

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SEMINARY SCHOLARSHIP APPLICATION

Name of Seminary
For Academic Year _____ Degree: _____
Full-time student : yes no
Year beginning Seminary _____ Year of anticipated graduation _____

Name _____ Date _____
Address _____ Telephone _____

City State Zip Social Security No.: _____
Church _____ Association _____ No. of Years _____

Church Activities: _____

Education			Graduate Y/N
High School _____	Year _____		_____
College _____	Year _____	Degree _____	_____
Graduate _____	Year _____	Degree _____	_____

Use the back or a separate sheet if additional space is needed for the following two sections.

Describe your ministry plans and goals: _____

Describe your Call: _____

On a separate sheet of paper write an essay of 500 words about:
1) **Your Christian testimony**
2) **A brief biography of your life**
Be sure to include other church activities, study groups, talents, sports, hobbies, community service in your biography.

(Over)

REFERENCES:

Pastor: Name _____

Address _____

City/St/Zip _____

Telephone Number _____

**WMU Director/
Missions
Leader:** Name _____

Address _____

City/St/Zip _____

Telephone Number _____

**Sunday School
Director/
Christian
Education** Name _____

Address _____

City/St/Zip _____

Telephone Number _____

**Reference
of your
choice:** Name _____

Address _____

City/St/Zip _____

Telephone Number _____

**Parents or
closest
living
relative:** Name _____

Address _____

City/St/Zip _____

Telephone Number _____

I affirm that the information on this application is correct.

If my plans to engage in career missionary service should change in the future and I no longer plan to be a career missionary, I acknowledge the scholarship granted by WMUV will be deemed a loan that I will repay, beginning within one year after seminary graduation (or leaving the seminary).

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.

Signature

Date

Mail to: **WMUV Scholarships**
P. O. Box 8435
Richmond, VA 23226

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_____ has applied for a scholarship from WMU of Virginia to attend _____ Seminary.

In order that we may give her application thorough consideration, we would appreciate your answers to the following questions.

1. *How long have you know her?* _____ Years *Relationship:* _____

2. *What are or have been her church activities?* _____

3. *What qualities of Christian leadership has she shown?* _____

4. *Are you encouraging her to prepare for career missionary service? Explain:* _____

5. *Discuss the qualifications which, in your opinion, will equip her for future missionary service.* _____

6. *Discuss any factors which might limit her success as a missionary.* _____

_____ Signature

_____ Date

Use the back or add another sheet if additional space is needed for your response.

Return to: Scholarships, WMU of Virginia, P. O. Box 8435, Richmond, VA 23226