

The following pages are the forms for financial assistance from the:

**North Central Association Scholarship Fund**

Please read page two carefully regarding the qualifications to receive a scholarship. Applicants from the North Central Association are given priority consideration but any student who is a member of a North American Baptist Church will be considered. The application must be postmarked no later than July 15<sup>th</sup> of the year of application so that the Scholarship Fund Committee can meet early enough to award the scholarship in time for students to qualify for matching grants that might be available from the institution of their choice. These forms are available on [www.npreregion.org](http://www.npreregion.org) or at the email address listed below.

Please provide your email address on page 5.

Thank you,

Scholarship Fund Committee

Please mail or email your applications to:

Dwight Enockson  
424 20<sup>th</sup> Ave SW  
Washburn, ND 58577-9542  
701-462-3352

[enocksond@westriv.com](mailto:enocksond@westriv.com)

**North Central Association of The North American Baptist Conference**  
**Scholarship Fund**

Financial Assistance Application Form

*Please Read the Following Policy and Guidelines*

1. The fund shall be for the purpose of aiding students who hold membership in a Church of the North Central Association at the time of their enrollment in one of the schools outlined herein, and are preparing for full time or lay Christian service. In the event that there are no NCA students who, in the opinion of the committee, require finance assistance, the committee may, at it's discretion, aid students who are member of churches affiliated with the North American Baptist Conference.
2. A student applying for money from this fund must be enrolled or accepted as a student in the Sioux Falls Seminary, Sioux Falls, SD; Taylor College and Seminary, Edmonton, AB, Canada or comparable Christian colleges or seminaries.
3. A student applying for funds must submit in writing his or her purpose for requesting funds, and such other information as the committee may request.
4. When and if the applicant is awarded a scholarship the funds will be made available upon enrollment of their choice of institution.. The treasurer, prior to disbursement of funds, must receive notice of the applicant's enrollment. Disbursement will be made in the name of the institution and the applicant.
5. The committee may decide, upon the merit of the application, the amount to be given to the students during the school year; based upon the existing needs, the home church's recommendation and participation, and the circumstances, on an annual basis. The committee will first consider applications from students enrolled in a degree program at a seminary or Bible college who have the intention of preparing for a church or missionary occupation. If funds are available the committee may consider an application from someone enrolled in a Bible College or University preparing for lay ministry.
6. **A letter of recommendation shall be forwarded to the NCA Scholarship Fund secretary from the sponsoring church deacon board on behalf of the applicant.**
7. The financial assistance committee would suggest that in the event the applicant does not continue in full time Christian service that the applicant would consider reimbursing the Scholarship Fund.
8. The cut-off date for applications being accepted is July 15<sup>th</sup>. Any application postmarked later than July 15<sup>th</sup> will most likely not be considered for funding for that academic year.

**Please Fill Out This Application and Submit It On Or Before July 15<sup>th</sup>**

**Personal and Family Information**

1. Name of Applicant \_\_\_\_\_
2. Present Address \_\_\_\_\_  
Street or PO Box # City State ZIP
3. Date of Birth \_\_\_\_\_
4. Church Membership at \_\_\_\_\_
5. Marital Status Single [ ] Married [ ]  
If Married – First Name of Spouse \_\_\_\_\_ Occupation \_\_\_\_\_  
Ages of Children \_\_\_\_\_
6. Name of Parents \_\_\_\_\_
- Address \_\_\_\_\_  
Street or PO Box # City State ZIP
- Place of Employment Father \_\_\_\_\_  
Mother \_\_\_\_\_
7. Name of Spouse's Parents \_\_\_\_\_
- Place of Employment Father \_\_\_\_\_  
Mother \_\_\_\_\_

**Educational & Vocational Information**

8. Schools you have attended, beginning with high school and including the one in which are presently enrolled:

Name	City	Grade or Degree	Year Completed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



10. Please give the complete mailing address of the college you will be attending:

Name of the College \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Please designate: Quarter [ ] Semester [ ]

1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_

What type of full time or lay ministry do you see the Lord asking you to prepare for?

\_\_\_\_\_

**Financial Information**

11. **Assets**

**Value**

Personal or Spouse's Savings

\$ \_\_\_\_\_

Automobile

\$ \_\_\_\_\_

Life Insurance

\$ \_\_\_\_\_

Other: \_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

**TOTAL**

\$ \_\_\_\_\_

12. **Sources of Income**

**Estimated Annual**

**Amount**

Personal earnings while in school

\$ \_\_\_\_\_

Spouse's earnings

\$ \_\_\_\_\_

Assistance from parents

\$ \_\_\_\_\_

Assistance from Spouse's parents

\$ \_\_\_\_\_

Assistance from local Church

\$ \_\_\_\_\_

Other: \_\_\_\_\_

\$ \_\_\_\_\_

**TOTAL**

\$ \_\_\_\_\_

13. Expenses this school year

Estimated Amount

Tuition	\$ _____
Books	\$ _____
Room and Board	\$ _____
Travel	\$ _____
Other: _____	\$ _____
Total \$ _____	

14. Have you applied for financial aid from other sources? Yes [ ] No [ ]

Where: \_\_\_\_\_  
Amount: \$ \_\_\_\_\_

15. Amount of financial aid being sought from the NCA Scholarship Fund \$ \_\_\_\_\_

16. Please give a brief statement of your personal goals:

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17. Give a brief testimony of you salvation and Christian faith. (Use back if more room is needed)

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18. Students email address: \_\_\_\_\_

In submitting my application for financial assistance from the NCA Scholarship Fund, I agree to the operating principles and procedures as stated. To the best of my knowledge the above information is correct.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of spouse or parent \_\_\_\_\_ Date \_\_\_\_\_

Based on the facts as given above, the Scholarship Fund committee of the North Central Association of the North American Baptist Conference authorizes financial aid in the amount of \$ \_\_\_\_\_

Signature of Secretary-Treasurer \_\_\_\_\_ Date \_\_\_\_\_