

**APPLICATION FOR
ROCKY MOUNTAIN FOUNDATION SCHOLARSHIP AID
FOR THE 2021-2022 SCHOOL YEAR**

QUALIFICATIONS

The Rocky Mountain Foundation provides scholarship aid to full time students who attend a Southern Baptist college, university or seminary. The applicant must be preparing for a **church related vocation**, be an active member of a local Southern Baptist Church, and meet the scholastic requirements of the institution he/she attends. **Completed application and all four reference forms must be received in the RMF office POSTMARKED NO LATER THAN April 1, 2021. WE WILL NOT CONSIDER INCOMPLETE OR LATE APPLICATIONS.**

PERSONAL INFORMATION

NAME _____ SEX _____ AGE _____

ADDRESS _____

DAYTIME PHONE _____
Street/Box City State Zip
EVENING PHONE _____

ARE YOU A CHRISTIAN? _____ HOW LONG? _____ COLORADO CHURCH OF WHICH YOU ARE/WERE A MEMBER _____

DATES OF MEMBERSHIP _____ CITY _____

CHURCH MEMBERSHIP WHILE ATTENDING SCHOOL _____
Church Name

Church Address City State Zip
MARITAL STATUS _____ NUMBER OF CHILDREN, IF ANY _____

EDUCATION INFORMATION

HIGH SCHOOL GRADUATE? _____ IF YES, WHEN? _____ NAME/LOCATION _____

COLLEGE GRADUATE? _____ IF YES, WHEN? _____ NAME/LOCATION _____

COLLEGE/UNIVERSITY/SEMINARY YOU PLAN TO ATTEND? _____

HAVE YOU APPLIED? _____ BEEN ACCEPTED? _____ CLASSIFICATION? _____

DEGREE DESIRED: _____

CHURCH RELATED VOCATION FOR WHICH YOU ARE PREPARING: _____

FINANCIAL INFORMATION

STATE WHY YOU NEED FINANCIAL ASSISTANCE _____

DO YOU PLAN ON EMPLOYMENT WHILE ATTENDING SCHOOL? _____ ARE YOU APPLYING FOR OTHER FINANCIAL AID? _____ LIST: _____

ARE YOU PRESENTLY RECEIVING ANY FINANCIAL AID FROM THE COLORADO BAPTIST GENERAL CONVENTION? YES _____ NO _____

IF YES, DESCRIBE: _____

REFERENCES

LIST THE PERSONS YOU ARE ASKING TO COMPLETE THE REQUIRED REFERENCE FORMS. YOU MUST HAVE BEEN A MEMBER OF A COLORADO SOUTHERN BAPTIST CHURCH FOR A MINIMUM OF TWELVE (12) MONTHS PRIOR TO ENTERING SCHOOL. AT LEAST ONE OF YOUR REFERENCES SHOULD BE FROM COLORADO. **DO NOT INCLUDE RELATIVES.**

1. COLORADO PASTOR'S NAME (OR OTHER PASTOR WHO HAS KNOWN YOU AT LEAST 1 YEAR)

NAME: _____

ADDRESS: _____
Street/Box City State Zip

2. NAME: _____

ADDRESS: _____
Street/Box City State Zip

3. NAME: _____

ADDRESS: _____
Street/Box City State Zip

4. NAME: _____

ADDRESS: _____
Street/Box City State Zip

BE SURE TO LIST YOUR NAME AS THE APPLICANT ON THE REFERENCE FORMS YOU SEND OUT. ASK EACH REFERENCE TO COMPLETE AND RETURN THE REFERENCE FORM TO THE ROCKY MOUNTAIN FOUNDATION OFFICE **POSTMARKED NO LATER THAN APRIL 1, 2021.** IT IS YOUR RESPONSIBILITY TO GIVE PROPER FORMS TO PERSONS FURNISHING REFERENCES AND TO MAKE SURE THE FORMS ARE MAILED TO THE SCHOLARSHIP COMMITTEE BY THE DEADLINE. **WE HAVE FOUND FROM EXPERIENCE THAT IT MAY BE TO YOUR ADVANTAGE TO CONTACT THOSE YOU HAVE CHOSEN FOR YOUR REFERENCES AND REMIND THEM OF THE APRIL 1ST DEADLINE.**

PLEASE NOTE:

EACH YEAR MANY APPLICANTS ARE NOT CONSIDERED BECAUSE THEY SUBMIT INCOMPLETE OR LATE APPLICATIONS. PLEASE USE THIS WORKSHEET FOR YOUR CONVENIENCE BECAUSE WE WILL NOT CONSIDER INCOMPLETE OR LATE APPLICATIONS.

PLEASE ATTACH THE FOLLOWING:

1. One typed paragraph describing your salvation experience.
2. One typed paragraph or more stating the church-related vocation you are pursuing and why you feel God's call to this vocation. (Please include CURRENT personal involvement in ministry.)
3. One-typed paragraph describing your financial need.
4. Include a copy of your college transcript, if you are pursuing your Bachelor's degree; or if you are already pursuing a Master's degree, include a transcript from your seminary.

PLEASE DO NOT TAKE THESE STEPS LIGHTLY. IF YOU DO NOT SEND EVERY ITEM ON THE CHECK LIST, YOUR APPLICATION WILL NOT BE CONSIDERED.

PLEASE MAIL ALL COMPLETED FORMS TO:

**SCHOLARSHIP COMMITTEE
ROCKY MOUNTAIN FOUNDATION
7393 S. ALTON WAY
CENTENNIAL, COLORADO 80112**

THE SELECTION BY THE SCHOLARSHIP COMMITTEE IS MADE SHORTLY AFTER THE DEADLINE. YOU WILL BE CONTACTED WHEN THE FINAL DECISION HAS BEEN MADE REGARDING YOUR APPLICATION.

YOUR SIGNATURE _____ DATE _____

DID YOU REMEMBER?

_____ TO ATTACH A TYPED TESTIMONY TO THIS APPLICATION?

_____ YOUR PAGE DESCRIBING GOD'S CALL AND YOUR CURRENT PERSONAL MINISTRY INVOLVEMENT?

_____ YOUR COLLEGE/SEMINARY TRANSCRIPT?

_____ THAT YOU MUST HAVE THIS APPLICATION IN THE RMF OFFICE POSTMARKED BY APRIL 1, 2020?

_____ THAT YOU MUST HAVE ALL REFERENCES IN THE RMF OFFICE POSTMARKED BY APRIL 1, 2020?

Reference Form – Scholarship Fund

The **Rocky Mountain Foundation** provides scholarship aid to students who attend a Southern Baptist college, university or seminary.

The applicant must be preparing for a church-related vocation, be an active member of a local Southern Baptist church and meet the scholastic requirements of the institution he/she attends.

PLEASE COMPLETE AND RETURN TO THE **ROCKY MOUNTAIN FOUNDATION** BY THE DEADLINE: **POSTMARKED NO LATER THAN APRIL 1, 2021**

_____ has applied for scholarship aid:
(APPLICANT'S NAME)

1. How long have you known this applicant? _____

2. What is your relationship to the applicant? (Pastor, teacher, friend, other)

3. To the best of your knowledge, describe the applicant's relationship to his church.

4. Give your evaluation of the applicant's character. _____

5. Give your evaluation of the applicant's financial need. _____

(Signature)

6. **PLEASE RETURN THIS FORM TO:**
Scholarship Committee
Rocky Mountain Foundation
7393 S. Alton Way
Centennial, CO 80112