



TRUTH. TRAINING. TRANSFORMATION.

College of Biblical Studies Inner Change Fellowship Initiative Scholarship (IFI) Application

Purpose

The purpose of the Inner Change Fellowship Initiative Scholarship (IFI) is to provide financial assistance for tuition and fees associated with a student's enrollment in course(s) that fulfill the requirements for completion of a degree program of study.

Criteria

The recipient and the scholarship amount or award will be determined based on the applicant's meeting the scholarship eligibility requirements. Scholarships are awarded on a first come-first served basis.

Award

The Student Financial Services Office will contact scholarship applicants chosen to receive an award. Funds for this award are received through private donation and are awarded based on the availability of funds on an academic year basis.

Eligibility Requirements:

In order to be considered for a scholarship award, each applicant must fulfill all of the following:

1. Submit a completed Application for the scholarship.
2. Must register for course(s) required for their enrolled degree program of study
3. Complete a Free Application for Federal Student Aid (FAFSA) and the supplemental CBS financial aid application.
4. Maintain satisfactory academic progress and a cumulative minimum grade point average of a 2.0 and be in good standing with the College of Biblical Studies.
5. Written recommendation from the IFI Program Director

Submission Requirements:

Faxed copies of the application will not be accepted. Return the completed application and IFI Director recommendation to:

The College of Biblical Studies - Houston
Student Financial Services Office, Suite 102
7000 Regency Square Blvd
Houston, TX 77036

NOTE: Incomplete applications will not be considered. All scholarships are awarded on a first come first served basis and are based on the date submitted to the Student Financial Services Office.

IFI SCHOLARSHIP APPLICANT INFORMATION

Last Name: _____ First Name: _____

Degree Program of Study: _____

Mailing address _____

Email address: _____

Phone Number (_____) _____ Cell Phone Number (_____) _____

Ministry Information:

Church name _____

I attend the above named church on a weekly basis. Yes No

Church mailing address _____

Phone Number (_____) _____ Fax Number (_____) _____

Name of Senior Pastor _____

Denomination (*National, State or Association Affiliation*): _____

How long have you been attending this church? _____

(If less than one year, please provide information on your previous church)

Name and address of previous church _____

Primary place and area of ministry _____

Other areas where you have served _____

I understand that I must be enrolled in an eligible course(s) for any academic year/term(s) in which the scholarship is awarded. If I withdraw from a course(s) I will forfeit the scholarship and must pay for any charges that I have incurred during the term of enrollment. .

I also grant my permission to release my name, church's name and information, course(s) and references as a condition of receiving a scholarship award to the donor supporting this scholarship.

I hereby certify that all of the information provided in this application is true to the best of my knowledge.

Applicant name: (please print name) _____

Signature of Applicant: _____ Date: _____