College of Biblical Studies
Small Church Pastor Scholarship Application

Purpose:
The purpose of the Small Church Scholarship is to provide financial assistance for student’s enrollment in course(s) that support the equipping of the student for the role of a Senior Pastor and enhance their ability to lead, preach and grow their church memberships.

Awarding
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 Criteria
In order to be considered for a scholarship an applicant must meet the following requirements:

Must be a Pastor (male or female) of an established Evangelical Protestant Church that is (documentation must be submitted with the scholarship application to substantiate one of the below)

- Recognized by the Internal Revenue Service as a 501 (c) (3) Exempt religious organization (Documentation of 501 (c) (3) letter of determination must be submitted with scholarship application) or is operating under the umbrella of another church which is so recognized, or
- Recognized by the Internal Revenue Service through assignment of an Employer Identification number (EIN), or
- Recognized as tax-exempt by the State of Texas through issuance of a tax exemption as a church, or operation under the umbrella of a denomination or church holding one of the above.

1. The church has resident membership rolls greater than 40 but less than 300. Resident member is defined as anyone the church considers to be a member.
2. Student must be in a degree program
3. Scholarship applicant will submit 3 references (not members of the church) who are familiar with the Pastor and their church.
4. A completed Small Church Pastor Scholarship application must be submitted in accordance with CBS established deadlines.
5. Submissions of a Free Application for Federal Student Aid (FAFSA) to determine level of financial need, and eligibility for other scholarships and grants.
6. Maintain satisfactory academic progress and cumulative grade point average (GPA) of 2.0 and be in good standing with the College of Biblical Studies.
7. Award recipient must submit a letter of appreciation prior to CBS funding the scholarship award. The letter should include the following:
a. Background and information regarding the applicant’s church.

b. Recipients CBS studies and how (or will) the studies contribute to their efforts to
   
   i. Develop the church and its members
   
   ii. Evangelize and spread the gospel
   
   iii. Improve their pastoral skills (*including leading, preaching and shepherding*)
   
   iv. Grow the church and its impact in their community

**Submission Requirements:**

Faxed copies of the application will not be accepted. Return the completed application and other required information to:

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

Last Name: __________________________     First Name: __________________________

Citizen of the United States? Yes

Mailing address: __________________________

_____________________________________

Email address: __________________________

Phone Number (____) ____________     Cell Phone Number (____) ____________

Church Ministry Information:

IRS 501 (c)(3) Tax Exempt Number #:____________________ (attach copy of letter of
determination)

Church name: ________________________________________________________________

Church mailing address: ________________________________________________________

_____________________________________

Phone Number (____) ____________     Fax Number (____) ____________

Number of members attending each day of worship: _______________________________.

Denomination (National, State or Association Affiliation): ________________________

If an independent church, please explain: _________________________________________

Are you a mission of another church? Yes     No

If yes, please give the name, address, phone number and Senior Pastor’s name:

Senior Pastor’s Name: ___________________________________________________________

Church mailing address: ________________________________________________________

_____________________________________

_____________________________________

_____________________________________
Phone Number (_____) _______________  Fax Number (_____) _______________

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 foundation which supports 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: __________
References

List 3 denominational leaders, or other reference names other than members of your church or suppliers/vendors to your church.

Name: ________________________________________________________________

Relation to Church: ______________________________________________________

Mailing Address: _________________________________________________________

City/State/Zip Code: _____________________________________________________

Phone Number(s): ________________________________________________________

Name: ________________________________________________________________

Relation to Church: ______________________________________________________

Mailing Address: _________________________________________________________

City/State/Zip Code: _____________________________________________________

Phone Number(s): ________________________________________________________

Name: ________________________________________________________________

Relation to Church: ______________________________________________________

Mailing Address: _________________________________________________________

City/State/Zip Code: _____________________________________________________

Phone Number(s): ________________________________________________________