

**APPLICATION**  
**Ozie Claude Mingledorff, Jr. Scholarship**

Name \_\_\_\_\_ G.P.A. (required) \_\_\_\_\_

Address \_\_\_\_\_

— (Street) (City) (State) (Zip)

Major Area of Study \_\_\_\_\_ Institution \_\_\_\_\_

Home Church \_\_\_\_\_ Home Country/Citizenship \_\_\_\_\_

<u>Financial Resources</u>	<u>Annual</u>
Student's Personal	\$ _____
Family	_____
Scholarships/Grants	_____
Loans	_____
TOTAL	\$ _____

Please provide a short written personal statement, including your goals, when you plan to finish the degree, etc.

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Forward 3 recommendations to your student financial aid office. Your application will not be processed until all recommendations are received.

**Signed** \_\_\_\_\_

**APPLICATION AND ALL THREE RECOMMENDATION FORMS MUST BE RETURNED TO THE FINANCIAL AID OFFICE ON OR BEFORE APRIL 15.**

**TO BE COMPLETED BY THE FINANCIAL AID OFFICER:**

This student's estimated costs for one year are:  
room and board \_\_\_\_\_  
tuition \_\_\_\_\_  
other expenses \_\_\_\_\_

This student's financial aid package consists of:  
scholarships \_\_\_\_\_  
grants \_\_\_\_\_  
loans \_\_\_\_\_  
other \_\_\_\_\_

**Student's expected family contribution as determined by FAFSA** \_\_\_\_\_

**This student is enrolled and has an unmet need of \$** \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Institution\_\_\_\_\_

## **OZIE CLAUDE MINGLEDORFF, JR. SCHOLARSHIP FUND**

Scholarships shall be available to students attending:

Asbury College  
Eastern Nazarene College  
Nazarene Bible College (CO)  
Olivet Nazarene University  
Southern Nazarene University  
Trevecca Nazarene University

### **GUIDELINES**

All persons eligible for scholarships must meet the following requirements:

1. All applicants must be born again Christians.
2. Any high school graduate applying must have a "C" average to qualify. To continue to qualify, the student must maintain a "B" average and must carry at least 12 hours. Once awarded, the scholarship may be given for successive years during undergraduate work.
3. Scholarships are to be awarded on the basis of need together with academic excellence. The funds are to be applied only to tuition and may be in varying amounts between a minimum of \$300 to a maximum of \$1,500.
4. Students of Nazarene colleges, other than the above named schools, may qualify if the above school does not have the desired courses needed for the specific major. They must, however, attend one of the above named schools for the first two years.
5. Scholarships are available as follows:  
  
The applicant will apply to the college of his/her choice (among those listed above). When the college agrees to accept the student, the college will submit the student's application together with their three recommendations to the Education Commissioner for a scholarship. Scholarships will be granted for one year and will be divided equally by terms/semesters by the Financial Aid Office. If the student fails to attend one or more terms during the year, that portion of the scholarship must be returned to the International Board of Education. Application forms will be available from the Financial Aid Offices of the above named colleges.
6. Because of Ozie Claude Mingledorff's special interest in the young people of the Fitzgerald Church of the Nazarene in Fitzgerald, Georgia, priority shall be given to students from that church who meet the other requirements of this scholarship.

Applications and three recommendation forms should be made available at the Financial Aid Office. When completed and certified by the Financial Aid Officer, please see that the applications are mailed to:

International Board of Education  
Church of the Nazarene-Global Ministry Center  
17001 Prairie Star Parkway  
Lenexa, KS 66220  
Fax: 913-577-0858  
Email: bnajarian@nazarene.org

**RECOMMENDATION**

\_\_\_\_\_ has applied for a scholarship through the International Board of Education of the Church of the Nazarene.

Please complete a brief recommendation for the student and send directly to the Student Financial Aid Office. Please include personal knowledge of student and pertinent information on goals, etc.

Student's Country of Origin\_\_\_\_\_

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Signed\_\_\_\_\_

Title\_\_\_\_\_

Institution\_\_\_\_\_

\_\_\_\_\_

Date\_\_\_\_\_

**RETURN THIS FORM TO THE STUDENT FINANCIAL AID OFFICE**

**DEADLINE: April 15, 2009**

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