

**APPLICATION**  
**Widmeyer, Yeatts International Student 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 \_\_\_\_\_

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

This student's estimated costs for one year are:	This student's financial aid package consists of:
room and board _____	scholarships _____
tuition _____	grants _____
other expenses _____	loans _____
	other _____

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

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

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

Institution \_\_\_\_\_

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

3/2009

**WIDMEYER, YEATTS**  
**INTERNATIONAL STUDENTS SCHOLARSHIP FUND**

Scholarships shall be available to students from World Mission areas attending any of the following institutions:

Ambrose University College	Nazarene Theological Seminary (MO)
Eastern Nazarene College	Northwest Nazarene University
MidAmerica Nazarene University	Olivet Nazarene University
Mount Vernon Nazarene University	Point Loma Nazarene University
Nazarene Bible College (CO)	Southern Nazarene University
Nazarene Theological College- Manchester	Trevecca Nazarene University

In the event funds are still available, after all applications from the above list have been taken care of, then the children of missionaries may be given consideration for a scholarship.

**GUIDELINES**

All persons eligible for scholarships must meet the following requirements:

- A. All applicants must be born again Christians.
- B. All applicants must submit one recommendation from their Regional Director, Field Director, or Mission Council. Also, recommendations must be submitted from two persons who officially represent the institution where the student is enrolled.
- C. Scholarships are available as follows: After the applicant is admitted by one of the above colleges, the college will submit the student's application together with his/her three recommendations to the Education Commissioner. Scholarships are granted for one year and shall 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. If the recipient maintains a fair grade, a scholarship may be granted for the second year. Preference will be given to students who have received the scholarship previously. The limit of scholarships to one individual is two years. There is one exception: When a person is preparing to teach in one of the mission schools and a third-year scholarship will permit him/her to graduate with a degree, such third-year scholarship will be available.
- D. A scholarship is to be applied only on tuition and may be in varying amounts up to full tuition. The international student must be responsible for all other expenses.

Applications and recommendation forms should be made available at the Financial Aid Office. When completed and certified by the Financial Aid Officer, please see that the forms 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](mailto: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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