FORM NO. 2 of 4

## FOUNDATION FOR COLLEGE CHRISTIAN LEADERS A NON-PROFIT CORPORATION

2658 Del Mar Heights Road, PMB #266 Del Mar, CA 92014 2019/2020

## WWW.COLLEGECHRISTIANLEADER.COM

Mission Statement: The purpose of the Foundation is to assist Christian individuals with identified leadership history, high academic achievement and financial need to undertake academic, vocational and ministry training to further the Kingdom of Jesus Christ.

Name:			Date:
Permanent Address:			High School GPA:
			SAT Score:
Telephone:	(home)		First Score:
	(school)		Final Score:
Date of Birth:	Male	Female	Status: Married Single
			E mail address:
Next year I will be: (Cir	cle correct one) Fresl	hman, Sophon	
Next year I will be: (Cir	rcle correct one) Fresh	hman, Sophon	
`	,	hman, Sophon	
Next year I will be: (Cir Educational Background	,	hman, Sophon	
`	,	hman, Sophon	

## PLEASE ANSWER FULLY ITEMS 1 THROUGH 7 ON A SEPARATE SHEET

Deadline: Completed Applications must be received by May 18, 2019.

- 1. Your annual income. Attach first page(s) of federal tax return(s) for the past two years. Such information will be held in strictest confidence.
- 2. Your employment. Please give a resume of employment for the past two years, including address(es) of employer(s) and name of immediate supervisor, and the employers' telephone numbers. What amounts do you expect to personally earn next summer, and what amount do you expect to personally earn during the next school year?
- 3. Financial.
  - (a) If you have submitted to the federal government a Free Application for Federal Student Aid ("FAFSA") please provide the complete "Student Aid Report" ("SAR") which shows "Expected Family Contribution" ("EFC").
  - (b) If you have NOT applied through FAFSA or do not have the SAR and EFC please attach pages 1 & 2 of your parents' federal tax returns for the past two years. Such information will be held in strictest confidence. If your parents are divorced, both natural and step parents' (if remarried) tax returns for the past two years must be submitted in order to be considered for financial aid.
  - (c) In addition to (a) or (b), if your family is in ministry and receives a "parsonage" (or housing) allowance, state the annual amounts thereof for the past two years.
- 4. Parents' employment, including job titles and employers.
- 5. State whether you will receive in the next year, or have received in the past school year financial aid from any source, including relatives and others. Please list all such support by amount and payor(s).
- 6. Christian testimony (100-200 words total).

(A) List the educational institution(s) for				
	·			
(B) Will you attend (full) or (part) time? Circle one				
	mplete cost of your college education next school pard \$Books \$			
Living expenses \$	TOTAL \$			
	sts (be very specific, and include all source(s) and			
(E) Do you intend to provide any of these summer or during the school year?Y				
(F) What is maximum amount of financias	al aid you are seeking from this Foundation?			
Purposes to which the financial aid will b	e put:			
Major field of study intended (if known):				
References. List three personal references below. At least one reference must be yo	s, providing complete information as requested our pastor or youth pastor. Each			
reference must be able to describe, with s	pecific examples, your Christian activities and lea			
	pecific examples, your Christian activities and lea  Phone (home)			
reference must be able to describe, with s  Name:  Address:	Phone (home) Phone (work)			
Name:Address:	Phone (home) Phone (work)			
Name:Address:	Phone (home)  Phone (work)  Relationship to you:			
Name:	Phone (work) Relationship to you: Phone (home) Phone (work)			
Name: Address:  Name: Address:	Phone (home)  Phone (work)  Relationship to you:  Phone (home)			
Name:  Address:  Title:  Name:	Phone (home)  Phone (work)  Relationship to you:  Phone (home)  Phone (work)  Relationship to you:			
Name:	Phone (home)  Phone (work)  Relationship to you:  Phone (home)  Phone (work)  Relationship to you:  Phone (work)  Phone (home)  Phone (work)			

(Official transcripts only; Internet or elec			
13. Are you a renewal applicant?Yes_recipient of a Foundation award who is it			
14. Do you have any relatives receiving or ap who	oplying for an award	with us? If so,	
15. How did you hear of the Foundation fo	r College Christian L	eaders?	
By signing this Application below I state:			
(1) The information in this Application	and attachments is tru	e and correct; and	
(2) I will provide copies of transcripts, g weeks of receipt of them by me and I ack future awards.			
	Ap	plicant	
1. IMPORTANT: ONLY COMPLETE AN AWARD. ALL QUESTIONS MUST BE ANSW REJECTED AND WILL NOT BE CONSIDERE 2019 PLEASE NOTE THIS REQUIREMENT I "LEADERSHIP ASSESSMENT" FORM (APPL PAPERWORK AND ANY CONVERSATIONS 2. DO NOT SEND ORIGINAL DOCUME	VERED. INCOMPLED UNLESS RETUR NCLUDES FULL COLIES TO RENEWAL ARE TO BE INITIA	ETE APPLICATIONS WILL BE NED, COMPLETE, BY <b>May 18,</b> OMPLETION OF THE ATTACHED APPLICANTS AS WELL). ALL TED BY THE APPLICANT.	
WILL RECEIVE AWARDS.			
Please check:			
ETHNIC BACKGROUND			
African American	Asian	Other (Describe)	
Native American	Filipino	(Describe)	
Pacific Island	Hispanic		
White	Indo-Chinese		