

## ETHNOS COLLEGE SCHOLARSHIP APPLICATION

P.O. BOX 645, WARRENTON, VA 20188

Date:

Full Legal Name		
Last:	First:	Middle:
Contact Information		
Email Address:		
Cell/Home Phone:		Work Phone:
Permanent Residential Address (Not a P.O. Box)		
Number and Street:		Apt. #:
City:	State:	Zip Code:
International City:		Country:
Mailing Address (if different):		
Gender: 🗆 Male 🛛 Female	Date of Birth (MM/DD/YYYY):	
Academic Information		
Term for which you are applying:	🗆 Fall 🗌 Spring 🗌 Summer	Year:
Academic Goal: 🛛 Certificate	□ Associate Degree □ Bachelor Degree	
Major (Program of Study):		
<ul> <li>Enrollment Status (check the box that applies):</li> <li>Attending college for the first time since high school</li> <li>Returning to this college after attending another college</li> <li>Never attended this college but have attended or are currently attending another college</li> <li>Attending high school during the term for which I am applying to this college</li> </ul>		
Last term of attendance at Ethnos C	College (if applicable):	Semester Year
Income Information		
What is your monthly income amount (USD)?		
Please list any other sources or amounts of additional financial support for your studies at Ethnos College:		
Education Information		
Most Recent Education: 🗌 High School 🔅 College Degree 🗌 Post College Degree		
Grade Point Average: Please provide a copy of your most recent transcripts.		
On a separate sheet of paper, answer the following two questions: (Answers must be typed)		
<ol> <li>Write 2-3 paragraphs describing why you need scholarship assistance.</li> <li>Write 2-3 paragraphs describing your educational, ministry, and service goals.</li> </ol>		

\*Please email the completed scholarship application, including the answers to the two questions and all transcripts to: Admin@Ethnos-college.org.