

## Missionary Church Scholar Leader Program Application

The **Missionary Church Scholar Leader Program** is designed to support students affiliated with the Missionary Church who demonstrate strong academic ability, Christian character, and leadership potential. The program provides substantial institutional financial support for qualified students enrolling at Bethel University.

Please note the following requirements and deadline:

- Must be accepted to Bethel University beginning Fall 2026
- Enrolling as a full-time traditional student
- Be a residential student in Bethel housing
- Must complete the FAFSA by April 15, 2026
- Complete and return the Scholar Leader Program Application by May 1, 2026

**Return this and other documents to:**  
Financial Aid Office of Bethel University  
1001 Bethel Circle  
Mishawaka, IN 46545

Phone: 574.807.7415  
Fax: 574.807.7122  
E-mail: [FinAid@BethelUniversity.edu](mailto:FinAid@BethelUniversity.edu)

### Student Information

_____ Last name	_____ First name	_____ M.I.	_____ Bethel Student ID number or DOB
_____ Address (include apt. no.)			_____ Intended Major
_____ City	_____ State	_____ ZIP code	_____ High School GPA
_____ E-mail address			_____ (_____)_____ Phone number

Have you provided Bethel Admission office with your high school transcript? Yes or No

If no, please do so by the application deadline.

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### Church Involvement

_____ Missionary Church Name		
_____ Church Address (include apt. no.)		
_____ City	_____ State	_____ ZIP code

How long have you attended this church? \_\_\_\_\_

Describe your involvement in your church (ministries, leadership roles, volunteer service, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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## Leadership and Service

Please describe leadership roles or service activities you have participated in at school, church, or in your community:

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## Personal Statement

In 500 words or less, please address the following:

- Your Christian faith journey
- How your church has influenced your life
- How you hope to grow as a Christian leader

Attach your response to this application.

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## Missionary Church Affiliation Verification

(To be completed by a pastor or church leader)

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Student Name

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Church Name

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Pastor/Church Leader Name

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Phone Number

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Title/Role

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Email Address

## Verification Statement

I verify that the student listed above is an active attendee of our Missionary Church and is known to our congregation. I support their application to the Missionary Church Scholar Leader Program at Bethel University.

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Signature

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Date

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## Student Certification

I certify that the information provided in this application is accurate and complete.

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Student Signature

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Date