Elevate Chattanooga: Continuing Ministry Education Scholarship

APPLICATION



Personal Information

full name	date of birth
postal address	cell phone
city, state, zip	email
name of spouse (if applicable)	date of marriage (if applicable)
name(s) & age(s) of children (if applicable)	
home church	location of church
Institution you will be/are attending	
	Start/Finish:
seminary or school or program	length of class or program
5 1 5	
campus or location	
Previous education/Experience	
undergraduate institution that granted your degree	degree(s) earned
work/military expense (add additional page if necessary)	years of service
high school	month & year of graduation
Reference	
Please ask reference to send letter to TGT via mail or email. There is no specific form.	
name of ministry reference	church/institution
Description 0 Ocat of Olean	

Description & Cost of Class

In a separate attachment, please give a short description of the class(es)/courses(s) you will be taking and how it will impact your current ministry work. Please include the cost of the class(es)/course(s) and your financial need.

Confirmation

I hereby apply for a Elevate Chattanooga scholarship. In electronically signing my name, I attest that all information provided is factual.

Signed Date

Please email or mail your application to the following: The Generosity Trust 345 Frazier Avenue, Unit 205 Chattanooga, TN 37405 423-266-5257 Fax 423-265-0949 Attn: Jennifer Sheffield *Email: jennifer@thegenerositytrust.org*