



## Christian Ministry Scholarship Reference Form

*Instructions to Student: Send this form to you ministry supervisor. He/she should return the completed form directly to the Financial Aid Office. **This reference is due when the applicant has actually completed the ministry or by the start date of the semester for which the student is applying for the scholarship, whichever comes first.***

Applicant's Name \_\_\_\_\_

### To Ministry Supervisor:

Your Name / Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Please describe the type of Christian ministry in the applicant was involved in (be as detailed as possible).

How long was the applicant involved in this ministry?

How many hours per week?

Does the applicant demonstrate Christ-like character in his/her daily walk with the Lord? Please explain.

How does the applicant relate to others within and outside of this ministry?

What is the applicant's attitude toward receiving instructions from his/her leaders?

Please list any other information that may be helpful to us in considering this application. You may use the back, if you wish.

Ministry Leader signature \_\_\_\_\_ Date \_\_\_\_\_

*Please send completed form directly to:*

**Financial Aid Office  
Calvary Bible College  
15800 Calvary Road  
Kansas City, MO 64147**

**816-322-0110  
Fax: 816-331-4474  
finaid@calvary.edu**