

Emma Kapp Ogburn Scholarship

Gross family income last year: _____

Did you or your family have any extraordinary expenses last year? If yes, Explain: _____

Any unusual debts? If yes, explain: _____

Estimated Financial Budget

Academic Year: _____

Income:

Your savings _____

Earnings during year _____

Aid from parents _____

Aid from others _____

Scholarships/Grants
(explain in detail) _____

Spouse income _____

Other income
(explain) _____

Total: _____

Expenses:

Tuition/fees _____

Books _____

Room _____

Board _____

Personal needs _____

Travel expenses _____

Other expenses
(explain) _____

Total: _____

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Discuss below your vocational/ministry goals: (use additional sheet if necessary)

Please have three persons from your church (one may be your pastor) who know you well in relation to your ministry/vocation goals, sign this application as references.

Reference	Address	Phone
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Reference	Address	Phone
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Reference	Address	Phone
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Date

Signature of Applicant