



Application for Scholarship

Name _____

Church Membership _____

If in leadership/teaching role, please state _____

Pastor Name _____

Pastor's Signature _____

Amount requested (up to \$100 per course): \$ _____

I am enrolling in the following course: **Acts NT 2274 \$150**

Scholarship Guidelines:

1. Applicant must be an active member of a church affiliated with the Ouachita Baptist Association.
2. Scholarships are awarded to enable students to complete a course of study.
3. Scholarships are awarded each semester on an "as needed" basis and per available funds.
4. Students must agree to attend classes, complete course requirements, and to maintain a passing grade.
5. Scholarships are awarded on a per course basis.
6. If a course is dropped before completion, the scholarship must be refunded to OTTI.

I understand and agree to the Scholarship guidelines.

Signature: _____ Date: _____

OTTI Director Approval: _____ Date: ____/____/____