



Allegheny Center
 ALLIANCE CHURCH
following Jesus in diverse community

WORSHIP GROW SERVE SHARE

Name: _____

Please fill out completely. ***Only fully*** completed applications will be considered for approval.

Collegiate Students' Fund Application

1. Today's Date: _____ Birth Date: _____

2. Home Address: *(all future correspondence will be sent to this address)* School Address: *(to reach you at school)*

(Street) _____ (Name of College) _____
 (Street 2) _____ (Street) _____
 (City, State, Zip) _____ (Street 2) _____
 (Phone) _____ (City, State, Zip) _____
 (Email) _____ (Your Cell Phone) _____

3. Parents' Names: _____ Occupation: _____

Sibling(s)' Names:	Ages	Sibling(s)' Names:	Ages
___ in college			
___ in college			
___ in college			

4. Spouse's Name: _____ Occupation: _____

	___ in college
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Children's Names:	Ages	Children's Names:	Ages
___ in college			
___ in college			
___ in college			

5. Describe your salvation experience on Page 4. *(Only for first time applicant)*

6. Do you attend Allegheny Center Alliance Church? No _____ Yes _____ How Long? _____
 (Please note: CSF Scholarships are intended only for students attending ACAC on a regular basis.)

7. What is your current attendance involvement?

8. Are you a member at Allegheny Center Alliance Church? No _____ Yes _____ How Long? _____

9. In what ministries do you serve at the present time?

10. What degree and/or occupation are you pursuing?

Degree	Occupation

11. Describe in detail how God led you to pursue this field and how you anticipate God using you in this area of work.

12. Please list your work experience

Dates	Business	Type of Work

13. Please list your education experience

Dates	School	Degree Obtained/In Process

14. Academic Status next semester (please check one)

- Freshman Sophomore Junior Senior Post Graduate

15. List three *NON-FAMILY* references

Name	Phone	Relationship

16. Attach a current unofficial copy of your transcripts.

