



## Full-Time Christian Service Scholarship Certification

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This scholarship is awarded to full-time dependent students, taking classes on the Johnson City campus, whose parent works in a vocational ministry position in a church, Christian school, mission agency, etc.

Return this form to the Office of Financial Aid, 400 Riverside Drive, Johnson City, NY 13790

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Applicant Name \_\_\_\_\_ ID \_\_\_\_\_

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Parent's Name \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

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Organization of Full-time Service \_\_\_\_\_

*I certify that the aforementioned is serving our organization in a full-time capacity and receives his/her primary source of income from this ministry.*

\_\_\_\_\_  
Organization Official's Signature

\_\_\_\_\_  
Date

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\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date