



## ANNA JENTZSCH-BILL ENDOWMENT BURSARY APPLICATION

This bursary was set up as a memorial trust fund in 1994 with an initial gift of \$100. The fund was subsequently added to with maturing of a significant annuity and the ensuing interest. Its purpose is to support women in ministry.

Awards of up to \$5,000 will be provided from this fund.

Please submit your completed form by email to [scharter@united-church.ca](mailto:scharter@united-church.ca)

### Personal Information:

Name:

Address:

Telephone number:

E-mail address:

Are you female?

Yes

No

Are you in paid accountable ministry?

Yes

No

Are you a lay, ordained or diaconal minister?

Lay

Ordained

Diaconal

What studies, education or professional development are you pursuing and at what institution?

What is your purpose for seeking this educational opportunity? How will it enhance your capacity to provide ministry?

Please state briefly any other information pertinent to your application. For repeat applicants, please provide an update on your studies.



THE UNITED CHURCH OF CANADA  
**FOUNDATION**

<b>Please indicate how you heard of the Bill and Anna Jentsch Endowment Bursary Fund.</b>

**Please attach two letters of reference supporting your pursuit of this opportunity.**



**ANNA JENTZSCH-BILL ENDOWMENT BURSARY FUND  
STATEMENT OF PERSONAL FINANCES**

**Name:** \_\_\_\_\_  
First Name Middle Name Last Name

**Address:** \_\_\_\_\_  
Street City Province

**Tel.** \_\_\_\_\_  
Postal Code Office Home

Year of entry into current post-graduate program \_\_\_\_\_

Institution \_\_\_\_\_

Have you previously been awarded this bursary? Yes \_\_\_ No \_\_\_

Are you applying for any other scholarships or bursaries? Yes \_\_\_ No \_\_\_

What other scholarships/bursaries have you received?

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**I N C O M E**

Number of dependents other than self: \_\_\_\_\_

Net family income from all sources: \$ \_\_\_\_\_

Amount received for housing and transportation, if applicable: \$ \_\_\_\_\_

**TOTAL INCOME:** \$ \_\_\_\_\_

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**E X P E N S E S**

Housing costs \$ \_\_\_\_\_

Other living costs \$ \_\_\_\_\_

Debt payment \$ \_\_\_\_\_

Estimated study expenses for year of application:

Tuition \$ \_\_\_\_\_

Other Fees \$ \_\_\_\_\_

Books \$ \_\_\_\_\_

Transportation \$ \_\_\_\_\_ (please state nature)

Research costs \$ \_\_\_\_\_ (please provide a statement of amount and nature of any special research costs being required)

Other \$ \_\_\_\_\_

**Total Study Expenses:** \$ \_\_\_\_\_

**TOTAL EXPENSES:** \$ \_\_\_\_\_

**Amount of Scholarship Request:** \$ \_\_\_\_\_

**Date:** \_\_\_\_\_ **Signature of Applicant:** \_\_\_\_\_