



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

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

Please indicate how you heard of the Anna Jentsch-Bill Endowment Bursary Fund.

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?

INCOME

Number of dependents other than self: _____

Net family income from all sources: \$ _____

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

TOTAL INCOME: \$ _____

EXPENSES

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: _____