



IMPORTANT: A completed FAFSA is required for all scholarship applicants. If you have not completed your FAFSA for this current year, please use the following link to the FAFSA site to do so, <http://www.fafsa.ed.gov>

Student ID _____ M.Div. _____ MA in Ministry _____ MPTh _____ D.Min. _____ Enrollment Mo/ Yr _____

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ Evening Phone _____

Ethnicity _____

Denomination Affiliation _____

If you are part of the Wesleyan Denomination, please indicate your district _____

Please briefly describe your life goals.

Describe any personal needs you would like the committee to be aware of that necessitate your need for this scholarship.

(If additional space is needed, please attach additional pages.)

Student Signature _____ Date _____

Fax or email a signed copy to
wesley@indwes.edu | 765.677.1750

**APPLICATIONS SUBMITTED AFTER THE DEADLINE
DATE WILL NOT BE REVIEWED.**

OFFICE USE ONLY

Cohort Group:	
Code:	
Credits:	GPA: