Point University

SONS AND DAUGHTERS OF MINISTRY SCHOLARSHIP APPLICATION

Student name:	
Student number:	Student date of birth:
High school/College name:	
Current GPA:	Highest ACT (Cumulative) or SAT (Reading/Math) achieved:
Name of parent/guardian that i	s in full time vocation ministry:
Name of ministry:	Title:
Please sign below if you unders	tand and agree to the following statements regarding the Sons and
Daughters of Ministry Scholarsh	nip:

- The above scholarship is valued at \$250 per year for full time enrollment.
- I am the dependent of a parent/guardian that is in full time vocational ministry.
- I must maintain a cumulative GPA at Point University of 2.0. My GPA will be checked at the end of each spring semester.
- The amount of the scholarship may be reduced for less than full time enrollment, or less than 12 semester hours.
- I cannot regain eligibility for the scholarship if I lose it because I did not maintain the specified GPA.
- If I choose to join an athletic team or marching band, I will lose eligibility for this scholarship and will not be eligible to regain the scholarship.

Student signature: ______

Date: _____

Please submit application and any supporting documentation by email to your Admission Counselor or the Admission Office at Point University at *admissiondocuments@point.edu*.