



Faith Landmarks Bible Institute

8491 Chamberlayne Road

Richmond, Virginia 23227

PH: 804.262.7104 FX: 804.266.7127

SCHOLARSHIP APPLICATION

The scholarship committee of Faith Landmarks Bible Institute will hold all financial information in the strictest confidence.

The FLBI Scholarship fund has been established with the support of our alumni who are led by the Lord to sow into the lives of future Bible school students. The program is open to all students when the need for financial assistance is evident.

PLEASE READ CAREFULLY:

Please fill out the attached form in its entirety and return to the office. Answer all questions completely or this application may not be considered.

The Scholarship Committee will review your application, and you will be informed of their decision.

All of the following items must be completed and returned with this application before it can be processed:

- 1. Current photograph (head & shoulders only)
- 2. Application for Admission (New Students)
- 3. Enrollment Forms
- 4. Code of Conduct (All Students)
- 5. Complete financial disclosure form (Monthly Budget)
- 6. Copy of your W-2 or the equivalent for the past two years
- 7. Explanation of Financial Need (page 3)
- 8. Pastor's Recommendation Letter (Non-Members)
- 9. Most recent transcript of Grades (Returning Students)

**Head & Shoulders
Photo Only
2" x 2"**

**Photo is Mandatory
In Order to Process
This Application
(Not returnable)**

GENERAL INFORMATION (Please type or Print Legibly)

Last Name _____ First Name _____ Middle Name _____

Preferred Name _____ Social Security Number (last 4 digits only) _____ Date of Birth _____

Gender: Male Female Date of your salvation _____

Current Address _____ City _____ State _____ Zip _____

Email Address _____ Preferred Phone# (____) _____

Marital Status: Single Married Name of Spouse _____ Contact Phone #(____) _____

Getting to Know You Personally

1. Name of your Church _____
If you do not attend FLM, the Pastoral Recommendation Letter is required
2. How long have you attended your church? _____
3. Have you received the Baptism of the Holy Spirit? Yes No
4. Have you attended any other Bible school? Yes No If so, which one and where is it located?

5. Did you receive a degree? Yes No
6. What do you intend to do with your Bible School education? _____

7. What volunteer ministries are to active in? _____

Employment Information

Current Employer Name _____

Employer Address _____

Employer Phone # (_____) _____ How long have you worked there: _____

Spouse's Employer Name : _____

Employer Address _____

Employer Phone # (_____) _____ How long has your Spouse worked there? _____

Explanation of Financial Need

Briefly explain your need for financial assistance: _____

How many classes will you be taking each trimester? Fall _____ Winter _____ Spring _____

Total cost for all classes: \$ _____

What portion of Tuition are you able to pay? \$ _____



PASTORAL RECOMMENDATION

Dear Pastor:

The following student is applying for a scholarship to attend Faith Landmarks Bible Institute. Please complete this short form to help us determine eligibility for this program.

Thank you!

Student's Name: _____
(To be filled in by applicant)

Pastor:

How long have you know the applicant? _____

Are they an active member of your church? _____

In what capacity do they serve or in what areas do they volunteer:

Your name: (Please print) _____

Your Signature: _____ **Date:** _____

Please return this form to:

Faith Landmarks Bible Institute
Attn: The Registrar
8491 Chamberlayne Road
Richmond, VA 23227

MONTHLY BUDGET & Financial Disclosure

Name: _____ Date: _____

Income	Monthly Net	Gross	HOME EQUITY
You	\$	\$	Home Value: \$
Spouse	\$	\$	
Other	\$		Loan Value: \$
SSI	\$		
Disability	\$		Total Home Equity \$
Food Stamps	\$		
Total Income:	\$	Savings	
		Accounts	\$
Tithes/Offerings/Ministry		Mutual Funds	\$
Tithe (from gross)	\$	Retirement Fund	\$
Offerings	\$	Other Savings	\$
Building Fund	\$	Credit Cards	
Missions	\$	VISA	\$
Guest Speakers	\$	MasterCard	\$
Contact	\$	AMEX	\$
Ministerial Fellowship	\$	Discover	\$
		Credit Card:	\$
Expenses		Credit Card:	\$
Mortgage/Rent	\$		
2nd Mortgage	\$		
Utilities: Electric	\$	Debts	
Gas	\$	Furniture	\$
Water	\$	Appliance	\$
Heating Oil	\$	Student Loans	\$
Cable/Satellite TV	\$	Auto Loan #1	\$
Telephone & long distance	\$	Auto Loan #2	\$
Cell Phone	\$	Other	\$
Internet Service	\$		
		Insurance	
Groceries & personal care items		Home/Rental	\$
Clothing		Auto	\$
Laundry		Life	\$
		Health	\$
		Disability	\$
		Other	\$

Auto		Property Taxes	
Inspection	\$	Auto	\$
Gas	\$	Home	\$
Repair	\$	Other Taxes	\$
Plates/Stickers	\$		
Maintenance (Oil Changes	\$		
Tires, Coolants, etc.)			
Household		Miscellaneous	
Household Items	\$	Music CD's/Tapes	\$
Household Repair	\$	Video: Rental & Purchase	\$
Lawn Care	\$	Cosmetics/Hair Care	\$
		Pet Expense:	\$
		Recreation	\$
Medical		Education: Children	\$
Physicians	\$	Education: Adults	\$
Prescriptions	\$	Gifts: Christmas	\$
Dental	\$	Gifts: Other	\$
Glasses	\$	Vacation	\$
Over-the-counter pharmacy	\$	Subscriptions	\$
Therapy	\$	All other expenses	\$
Transportation/Equipment	\$		
Child Care			
Babysitting	\$		
After-School Program	\$		
Other	\$		
Total for All Income		Total for All Expenses	
\$		\$	
I certify that the above financial disclosure is complete and accurate to the best of my knowledge.			
Signature of Applicant: _____ Date: _____			

GUIDELINES FOR SCHOLARSHIP STUDENTS

Scholarship recipients are expected to:

- Maintain confidentiality of scholarship awards. Scholarship awards are based upon a variety of student situations. No two applications are alike and are not comparable.
- Refrain from discussion of scholarship awards among the student body.
- Use discretion when sharing of scholarship opportunities. Applications are individually reviewed and scholarships may not be awarded to all who apply.

Course Completion

- Scholarship students must complete coursework before scholarship requests are extended into the next trimester or next set of courses.
- Students are encouraged to maintain communication with the Registrar when extenuating circumstances prevent coursework completion.

If approved for scholarship, I agree to abide by the above policies and expectations of Faith Landmarks Bible Institute.

Printed First and Last Name

Signature

Date