**Texas Christian Women’s Job Corps®**

**Christian Men’s Job Corps®**

**Becky Ellison Endowment Scholarship**

*Application Deadline: Must be postmarked by May 24.*

PURPOSE: The Becky Ellison Endowment is to provide scholarships for CWJC/CMJC graduates and site leadership to further their education.

To celebrate the fifth birthday of Christian Women’s Job Corps in 2001, Texas site coordinators took an offering to create this endowment. In 2004 when the first Christian Men’s Job Corps site opened in San Angelo the name was changed to include CMJC. The endowment is to provide scholarships for CWJC/CMJC participants to further their education and funds for CWJC/CMJC leadership who need continuing education in areas related to the mission of CWJC/CMJC.

Recipients will be selected by the WMU of Texas Board of Directors EndowmentsAdministrative Committee in consultation with the Texas CWJC/CMJC Advisory Council. Preference will be given to first-time applicants. The Texas State Advisory Council recommends that a graduate can apply up to five years after graduation. The WMU of Texas Board of Directors Endowments Committee will determine amounts of assistance based on available earned income and will disburse the funds according to the following guidelines:

1. Scholarships for Texas CWJC/CMJC participants to further their education.

Applicants shall:

* Submit the application for the Becky Ellison Endowment Scholarship.
* Be a graduate of a certified CWJC/CMJC site.
* Be recommended by their site coordinator. Site Coordinators are required to complete and send the Recommendation for Participant Scholarship form to the State of Texas CWJC/CMJC Consultant prior to the deadline for the scholarship.
* Have an excellent attendance and participation record of the CWJC/CMJC program
* Show promise and evidence that further education will be pursued.
* Demonstrate a need for financial assistance.
* Be admitted as a student to a certificate program, trade school, college, or university.
* Provide a summary of their experience at the end of the school year to State Consultant for CWJC/CMJC who forwards the report to the WMU of TX Board of Directors Endowment Administrative Committee

1. Instructions for site leaders applying for funds for Texas CWJC/CMJC leadership who desire continuing education in areas related to the mission of CWJC/CMJC. A Recommendation form is not required for site leaders.

Site leader’s applicants shall:

* Submit the Becky Ellison Scholarship Application in writing stating the purpose and need of the scholarship
* List the continuing education focus area and the educational institution where instruction will be received.
* Have two years of experience with CWJC/CMJC
* Demonstrate an ongoing commitment to serve through CWJC/CMJC

Email Application and Recommendation to chris.rowley@texasbaptists.org

OR

Mail completed application to:

WMU of Texas

Attn: CWJC/CMJC State Consultant

10325 Brockwood Rd.

Dallas, TX 75238

**Becky Ellison Endowment Scholarship**

**Application**

|  |  |  |
| --- | --- | --- |
| **CWJC/CMJC Site Information** | |  |
| **Site Name** |  | |
| **Site Coordinator** |  | |
| **Mailing Address** |  | |
| **City, State, Zip** |  | |
| **Day Phone** |  | |

|  |  |
| --- | --- |
| **Applicant Information Participant Site Leader** | |
| **Applicant’s Name** |  |
| **Mailing Address** |  |
| **City, State, Zip** |  |
| **Home Phone** |  |
| **Cell Phone** |  |
|  |  |
| **PARTICIPANT APPLICANT ONLY:**  **Date of Completion with CWJC/CMJC** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **In 3-5 sentences, please describe your experience with CWJC/CMJC before graduation.** | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | |
| **SITE LEADER APPLICANT ONLY:**  **Dates of service with CWJC/CMJC** | |
| **In 3-5 sentences, please describe your experience with CWJC/CMJC** | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **I currently attend a church in my community** \_\_\_\_\_**Yes**  \_ **No** | |
| **I am serving in my church** \_\_\_\_\_**Yes**  \_\_\_\_\_\_**No** | |
| **If yes, provide the name of your church.**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Please describe how you are serving in your church** | |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Describe your educational goals: (degree pursuing and career goals)** | |
|  | |
|  | |
|  | |
|  | |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **I am just beginning my educational journey** \_\_\_\_\_\_ **Yes** \_\_\_\_\_\_**No** | |
| **If no, please describe your educational journey to date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |

|  |  |  |
| --- | --- | --- |
| **Total Estimated Cost** | **Fall** | **Spring** |
| **Tuition** |  |  |
| **Books/supplies** |  |  |
| **Fees** |  |  |
| **Equipment or supplies** |  |  |
| ***Total Annual Cost*** |  |  |

|  |
| --- |
| **Funds requested can be used for tuition, books, or fees. Please give a detailed description of your request. Ex. 250.00 Books, 500.00 Tuition**    **Please list the resources that you have applied for (including the amount) to help with the cost of school. (Ex. Pell grant, local scholarship, school loan, etc.)**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Please list the resources that are confirmed that you will receive (including the amounts received).**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |

**Amount requested $**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please note:**

* Funds are limited to the amount available and approved by the WMU of TX Board of Directors Endowment Committee.
* If you are a recipient of an endowment scholarship all funds will be sent to the educational institution or the CWJC/CMJC Site**.**

**Please provide the exact address where the check is to be sent include ATTN: .**

|  |
| --- |
| **Name of Educational Institution** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| |  | | --- | | **Attn:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **City, State, and Zip** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **Student ID#** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   **.** |

**Becky Ellison Endowment**

**Recommendation for Participant Scholarship**

**Send this Recommendation for Applicant to the State Consultant for CWJC/CMJC at**

**WMU of Texas**

**Attn: State Consultant CWJC/CMJC**

**10325 Brockwood Rd.**

**Dallas, TX 75238**

* Scholarships for Texas CWJC/CMJC participants to further their education
* Applicants shall:
* Be a graduate of a certified CWJC/CMJC site.
* Be recommended by their site coordinator.
* Have an excellent attendance and participation record of the CWJC/CMJC program.
* Show promise and evidence that further education will be pursued.
* Demonstrate a need for financial assistance.
* Be admitted as a student to a certificate program, trade school, college, or university.
* Provide a report to the State Consultant for CWJC/CMJC who forwards the report to the WMU of TX Board of Directors Endowment Administrative Committee at the end of their school year.

|  |
| --- |
| **Participant’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **CWJC/CMJC Site Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Date of completion with CWJC/CMJC**  **Describe applicant’s attendance and participation record while enrolled with CWJC/CMJC** |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| Describe the participant’s strengths and challenges he/she experienced while attending classes and how did he/she overcome them to graduate: |
|  |
|  |
|  |
|  |
|  |
| The participant maintained a relationship with his/her mentor while involved with CWJC/CMJC \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_ No |
| If No, describe the obstacles that interfered with the relationship |
|  |
|  |
|  |
|  |
| Why would you recommend this participant to receive a scholarship? How would it benefit this individual? |
|  |
|  |
|  |
|  |
|  |
|  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site Coordinator Signature Print Name