



# SHORT TERM MISSION TRIP SCHOLARSHIP APPLICATION

Your Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Age: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Best Contact #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Have you ever been on a Mission Trip? \_\_\_\_\_

## LEADERSHIP/PASTOR INFORMATION

Pastor/Leader Name: \_\_\_\_\_

Contact Info: Best Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

Please attach a letter of endorsement.

## MISSION TRIP INFORMATION

Trip Dates and Destination:

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

Purpose of Mission Trip; please write yes or no:

Medical \_\_\_\_\_ Dental \_\_\_\_\_ Evangelistic \_\_\_\_\_ Building \_\_\_\_\_

VBS/ Bible Club \_\_\_\_\_ Other (please explain) \_\_\_\_\_

## Spiritual Information

Please write your personal testimony: (or attach your own page)

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Why do you feel called to participate on this mission trip? (or attach a page)

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Are you willing to report about your trip to the Montana Southern Baptist Women after you return?

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Applicant Signature and Date

# Selection Process

We are so excited and honored to go on this journey with you! We comment to praying for each applicant and what God has planned for you! Of course, we want to give a scholarship to all that apply and we fully believe that is exactly what God will allow us to do in the near future! While with wait for that time, we do need to have a selection process!

In an effort to have a fair process we have set up a grading system that we can use on all applicants. Your leadership team of Montana women will review your application and apply a point total it. Then we will be asking other Montana Southern Baptist leaders to help us with the final selection.

First time Mission trip	5
Calling to the Mission field	10
Willing to write a summary	5
Personal reasons and testimony	30
Total possible	50

Mail applications to:

MSBW Application Selection  
PO Box 402  
Jordan, MT 59337