



# *Scholarship and Grant Program*

Sponsored by the  
The Church Network Endowment Fund



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Richardson, Texas 75080-5324  
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# The Church Network Endowment Fund Scholarship and Grant Program

**SCHOLARSHIP PROGRAM** (Maximum amount of scholarship for 2019 conference use is \$500 & certification use is \$500). **Please submit application and await approval before registering.**

In keeping with its mission of providing resources and training to church administrative leaders The Church Network is offering financial assistance for professional development and training to TCN members.

Scholarships will be available for training opportunities at TCN conferences (up to a maximum of \$500) and certification seminars (up to a maximum of \$500) .

There is a **limit of one scholarship per person per calendar year.**

Scholarships for individuals will be based on various factors. The Endowment Committee will review each application according to funds available and specialized need, and applicants must meet the criteria listed below:

1. Must be an Active member of The Church Network.
2. I am NOT a team leader on the local national conference support team.
3. Must be seeking to improve management skills.
4. Must be working for a local church which does not pay 100% of conference or certification expenses.
5. Conference scholarships will ONLY be awarded to those individuals registering for the *full TCN conference and who will be staying in either The Westin Charlotte, Hilton Garden Inn Charlotte Uptown or Hampton Inn Charlotte Uptown during the 2019 TCN conference.*

After an applicant for a scholarship is approved, the financial aid will be paid directly to the registrar of the conference, certification center, or local chapter workshop or seminar the applicant will be attending. We ask that you request only what you need in the amount of your scholarship. In this time of economic struggle, please be prudent with your request to permit more individuals to utilize the scholarship program.

**GRANT PROGRAM** (Maximum amount of grant \$350.00)

As money becomes available from the Endowment Fund, other specialized areas will be considered for grants of up to \$350. Grants might be used to do the following:

- Provide seed money to start new chapters and strengthen those in need.
- Send chapter president to national conference.
- Assist smaller churches without a business administrator by providing specialized training for staff members, and providing management resources.
- Provide training for The Church Network national office staff.
- Increase and improve management resources, products, and services for TCN members.
- Collect and analyze data which reveals trends related to church management.
- Improve placement and advisory services.
- Provide a specialist to research and prepare grant proposals from individuals and foundations for TCN special projects.

## **APPLICATION PROCESS**

To apply for a scholarship or grant, return completed application form to The Church Network national office for review and approval. By November of each year, the Endowment Committee will know the amount of funds available to be awarded during the next calendar year. Even though there are certain areas of training emphasis and specific criteria required, some other requests may be considered by the committee.



Date Received _____
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**ENDOWMENT FUND SCHOLARSHIP APPLICATION**

We ask that you request only what you need in the amount of your scholarship. Please be prudent with your request to permit more individuals to utilize the scholarship program.

I certify that I meet all of these criteria and hereby apply for a scholarship of \$\_\_\_\_\_ (Maximum amounts of scholarship - **\$500 for certification** or **\$500 for conference—limit of one scholarship per person per calendar year**). I understand that the financial aid will be paid, upon approval of scholarship, directly to the registrar of the conference or the certification center I plan to attend. **Please submit application and await approval before registering.**

1. I am an Active member of The Church Network national organization. Join date \_\_\_\_\_
2. I am NOT a team leader on the local national conference support team.
3. I am seeking to improve management skills.
4. My local church does not pay 100% of my conference or certification expenses.
5. If this scholarship is for the 2018 TCN conference, *I understand I must register for the full TCN conference and stay in either The Westin Charlotte, Hilton Garden Inn Charlotte Uptown or Hampton Inn Charlotte Uptown during the 2019 TCN conference.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**I. INFORMATION**

Name \_\_\_\_\_ Spouse \_\_\_\_\_

Title \_\_\_\_\_

Employer \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**II. THE CHURCH NETWORK INFORMATION**

Working toward CCA?  Yes  No Year CCA Awarded \_\_\_\_\_

Certification center attended \_\_\_\_\_

Working toward retention?  Yes  No Is there a chapter near you? \_\_\_\_\_

I am a member of \_\_\_\_\_ Chapter in \_\_\_\_\_

**III. EDUCATION BACKGROUND**

Year completed high school \_\_\_\_\_

College(s) attended (if any) \_\_\_\_\_

Year graduated from college \_\_\_\_\_

Post graduate studies/degrees \_\_\_\_\_

**IV. PROFESSIONAL EXPERIENCE**

	Employer	City/State	Your Position	Years Served
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

**V. SCHOLARSHIP NEEDS**

What training event are you planning to attend? \_\_\_\_\_

Date(s) \_\_\_\_\_ Cost \_\_\_\_\_

Location of event \_\_\_\_\_

Briefly describe your reasons for needing financial assistance. \_\_\_\_\_

What benefits/values do you expect to receive from this training? \_\_\_\_\_

Are there others assisting you financially? \_\_\_\_\_

Who? \_\_\_\_\_ How much? \_\_\_\_\_

**VI. YOUR FUTURE EDUCATION PLANS**

Briefly describe your continuing education plans for the next four years. \_\_\_\_\_

**VII. REFERENCES**

Please list three personal references.

1. Pastor/Co-worker \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

2. TCN Member \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

3. Friend \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

*This application to be returned to:*

**The Church Network**  
**Attn: Tammy Mirau (tammy@thechurchnetwork.com)**  
100 N. Central Expy. Suite 706  
Richardson, Texas 75080-5324  
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