

RIVER OF LIFE SCHOOL OF MINISTRY
SCHOLARSHIP APPLICATION

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Name _____ Social Security Number ____ - ____ - _____

Mailing Address _____ City _____ Country _____

Zip/Postal Code _____ Home Phone () _____

Cell Phone () _____ E-mail _____

FINANCIAL INFORMATION

Current yearly/monthly income: \$ _____

Assets	Name of Bank or Financial Institution	Balance
1. Checking Account: _____	-	\$ _____
2. Savings Account: _____	-	\$ _____

Personal Property	Description	Value
1. Property/House	_____	- \$ _____
2. Vehicle	_____	- \$ _____
3. Other	_____	- \$ _____

EMPLOYMENT INFORMATION

List any employment for the last 5 years

NAME OF EMPLOYER/COMPANY	POSITION	INCOME
1. _____	- _____	- \$ _____
2. _____	- _____	- \$ _____
3. _____	- _____	- \$ _____
4. _____	- _____	- \$ _____

