TLC Application for Scholarship

SAVED AS: TLC Application BLANK v 170801

PREFACE

Through this Scholarship program, the TLC Foundation is happy to provide an opportunity for a number of young Christian Haitians, to continue their studies.

Following a careful evaluation, the selected candidates will be chosen on the basis of their Christian leadership ability and their educational achievements. After their studies, these candidates will be given a diploma and will be ready to work for the advancement of their church and their community, and especially for the development of their country.

CRITERIA TO BE A CANDIDATE

1. To be Haitian.
2. To be no more than 24 years old at the time you would first attend University.
3. Demonstrate proven aptitudes as a Christian leader.
4. Good knowledge of English.
5. Baptized member of your Baptist Church.
6. To be in good health.
7. Satisfactory Completion of secondary studies in French (Certificates Bac 1+2 and transcripts of MENJS),
8. To promise to return to his/her district to work for the improvement of and change within his community, and of the church of Jesus Christ.
9. To have resided at least 10 years in his community
10. The candidate is willing to not change his/her marital status throughout the grant.

ALL CANDIDATES WILL PROVIDE

1. Completed application, **SIGNED AND DATED**
2. Copy of Bac 1 & 2 diplomas AND Scores for the exams
3. Official transcripts in French of the last **FOUR** years of secondary (**Troisième, Seconde, Rheto and Philo**) provided by the school, with school stamp and director's signature.
4. Copy of birth certificate
5. Copies of Carte d'Identite Nationale (CIN) **a. Candidate // b. Father // c. Mother**
6. Form: Verification de Baptême
7. Letter of recommendation from your **church committee**, signed by the pastor and, at least 3 members.
8. Letter of recommendation from **your church pastor**
9. Letter of recommendation from your **district** pastor
10. Letter of recommendation from one of your **teachers**
11. **If you have a passport, please provide a copy**
12. Two passport type pictures – NO MORE THAN 6 MONTHS OLD

SECOND ROUND CANDIDATES WILL PROVIDE

1. English **translation** of the French transcripts. The English translations will be stamped by the school and will be signed by the director.
2. Proof of vaccinations that are current.
3. TB TEST, from Hopital de Fermathe, done within 6 months of proposed start at University
4. Additional info, as needed.

For office use only:	
Student TLC ID Number _____	Pastor: _____
Date RECEIVED BY TLC:_____	District: _____
Received by:_____	Church: _____

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First name _____ **Last name** (Family name) _____
(Given name/s) (Surname)

Sex F ☐ // M ☐ // Email address _____

Date of birth _____ Place of birth _____

Marital status _____ Number of children (if applicable) _____

Address_____Phone_____

City _____ Department_____

Father 's Name _____Address_____

Job description _____His employer_____

His date of birth_____ Address of his employer_____

Mother's Name _____Address_____

Mother's Maiden Name (Nom de Jeune Fille)_____

Job description _____Her employer_____

Her date of birth_____ Address of her employer_____

Your current Church _____ Address _____

Pastor _____ His address _____Phone_____

Date of Baptism _____ In which church? _____

Your status in the church: Member____ Believer ____ Other ____ Since what date _____

Your role in your church _____

_____

_____

Educational history. List *all* schools attended.

School	Years	Diplomas received

Your studies have been financed by _____

Are you currently employed? Yes □ No □

If yes, what is your work history ?

Institution _____ Employer _____

Function _____ From _____ To _____

Institution _____ Employer _____

Function _____ From _____ To _____

Institution _____ Employer _____

Function _____ From _____ To _____

Do you possess a passport? Yes □ No □

Have you ever requested a Visa ? Yes □ No □

If yes, what type of Visa ?_____What country?_____

Obtained ?_____Refused ?_____

Do you speak English? Very well_____ Good_____ A little_____

Have you ever had another scholarship? Yes _____ No _____

What would you like to study?

1st Choice_____

Why do you want to study that? _____

_____

2nd Choice_____

Why do you want to study that? _____

_____

3rd Choice _____

Why do you want to study that? _____

_____

Why do you want to study abroad? _____

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Do you think that you will return to Haiti after your studies? Yes ☐ No ☐

Why? _____

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Explain briefly what your dreams are for your church _____

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What are two problems that exist in your home town?

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If you could, how would you solve these problems?

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What have you been doing since graduating from “philo”?

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What else can you tell us about yourself?

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By signing below, you solemnly affirm that all the information in this application is correct.

_____ _____

Candidate’s Signature Date

TELEPHONE NUMBERS

WHO	NAME	TELEPHONE NUMBERS
CANDIDATE		
FRIENDS **1….** **2….** **3…**.		
FATHER		
MOTHER		
OTHER FAMILY **1….** **2….** **3…**.		
DISTRICT PASTOR		
LOCAL CHURCH PASTOR		
COMMITTEE MEMBERS **1….** **2….** **3….** **4….**		
PROFESSOR		

SIBLINGS / COMPUTER INFO / Candidate name _____

HOW MANY BROTHERS DO YOU HAVE? _____

1. NAME AGE _____
WHAT IS HE DOING NOW

_____

2. NAME AGE _____
WHAT IS HE DOING NOW

_____

3. NAME AGE _____
WHAT IS HE DOING NOW

_____

HOW MANY SISTERS DO YOU HAVE? _____

1. NAME AGE_____
WHAT IS SHE DOING NOW

_____

2. NAME AGE_____
WHAT IS SHE DOING NOW

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3. NAME AGE_____
WHAT IS SHE DOING NOW

_____

What other information can you share with us regarding your brothers and sisters?

_____

_____

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COMPUTER INFO:

Do you have a Smartphone?____ Do you have access to a laptop? _____ If yes, who owns it? _____

What is the make and model? _____

What browser do you use? _____

What sites do you enjoy when you are browsing the internet? _____

What programs are you able to use? (Examples – Word, Excel, Powerpoint, etc.

_____
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YOUR HEALTH Candidate name:_____

What is your blood type: _____

Tell us about your health:

What diseases have you had? _____

When is the last time you went to see a doctor? _____

Why did you go? _____

What are your current health issues? _____

Have you had any operations? _____

For what? _____

Are you taking any medications? _____

For what? _____

OTHER MEDICAL INFO:

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FOM KOMITE LEGLIZ POU REKOMANDE KANDIDA POU INIVESITE LIBERTY

Komite legliz Batis Konsevatris _____

Non kandida a _____

ANE 20….

Komite direksyon k ap jere pwogram ki ede etidyan ki vle ale etidye nan inivesite Liberty ta apresye anpil si komite legliz la ta ka bay kèk enfomasyon konsenan kandida sa a. Tout moun gen pwen fò yo. Menm jan tou, tout moun gen pwen fèb yo. Souple, pataje enfòmasyon sa yo ak komite direksyon an. Nou ka kontinye ekri nan do fèy sa a,pou nou ka bay tout enfòmasyon nou panse ki itil e nesesè konsènan kandida sa a. Mèsi davans.

1. Depi ki dat nou rekonèt etidyan sa a: _____

2. Kisa nou ka di konsènan vi kretyen li:

_____

_____

3. Ki ròl li nan legliz la? _____

4. Kisa li fè ki ta fè nou panse ke li kapab yon bon lidè kretyen?

_____

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5. Kisa nou atan de etidyan sa a. Sa vle di, kisa nou vle pou l pote remèt nan legliz li, nan kominote l, nan peyi l

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6. Nan ki fason nou ka ede kandida sa a reyalize rèv li?

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7. Se yon angajman legliz la ak komite a ap pran, lè yo voye yon etidyan ale nan inivèsite Liberty. Nou dwe konprann angajman sa a. Nou genyen pou priye regilyèman pou li, kominike ak li, pale ak li, mande l rapò, fè l santi ke nou ankadre l, e nou la pou ede l jan nou kapab. **PA VOYE KANDIDA SA A SI NOU PA KA PRAN ANGAJMAN SA A.**

WI, NOU AKSEPTE PRAN ANGAJMAN SA A, e nou rekòmande l pou inivèsite Liberty:

1. _____	_____	_____	_____
Non manm komite a	Telefòn	Dat	Siyati
2. _____	_____	_____	_____
Non manm komite a	Telefòn	Dat	Siyati
3. _____	_____	_____	_____
Non manm komite a	Telefòn	Dat	Siyati
4. _____	_____	_____	_____
Non manm komite a	Telefòn	Dat	Siyati

VERIFICATION DE BAPTEME

Je, soussigné, Pasteur _____ certifie que

l'étudiant _____ est un membre baptisé de l'Eglise

Baptiste de _____

Date baptême: _____

Baptisé par: _____

Eglise Baptiste de: _____

Rôle de l'étudiant à l'église est:

_____

_____

_____

_____

_____ _____

Signature du Pasteur Date

Numéros téléphone du Pasteur: _____

Adresse email du Pasteur: _____

RECOMMANDATION PROFESSEUR

L'étudiant _____ pose sa candidature pour une bourse d'étude de quatre ans à Liberty University aux Etats Unis.

Sachant que nul n'est parfait, nous vous saurions gré de bien vouloir partager avec nous les points forts, et les points faibles, de ce candidat.

Prière d'ajouter, en pièce jointe, toutes autres informations qui pourraient aider le comité avec l'évaluation du candidat.

Pour plus de confidentialité, vous pouvez toujours envoyer ces informations à l'adresse email suivante:

Walter.Turnbull@gmail.com

Prière de partager vos coordonnés: Téléphone(s) _____ _____

Adresse email: _____

Merci d'avance ! Pour le comité de sélection: Walter Turnbull - tel 4771 5538

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POINTS FORTS:

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POINTS FAIBLES:

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Votre prénom et nom	Votre signature	Date

RECOMMANDATION PASTEUR DU DISTRICT

L'étudiant _____ pose sa candidature pour une bourse d'étude de quatre ans à Liberty University aux Etats Unis.

Sachant que nul n'est parfait, nous vous saurions gré de bien vouloir partager avec nous les points forts, et les points faibles, de ce candidat.

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Walter.Turnbull@gmail.com

Prière de partager vos coordonnés: Téléphone(s) _____ _____

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POINTS FORTS:

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POINTS FAIBLES:

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Votre prénom et nom	Votre signature	Date

RECOMMANDATION PASTEUR DE L'EGLISE

L'étudiant _____ pose sa candidature pour une bourse d'étude de quatre ans à Liberty University aux Etats Unis.

Sachant que nul n'est parfait, nous vous saurions gré de bien vouloir partager avec nous les points forts, et les points faibles, de ce candidat.

Prière d'ajouter, en pièce jointe, toutes autres informations qui pourraient aider le comité avec l'évaluation du candidat.

Pour plus de confidentialité, vous pouvez toujours envoyer ces informations à l'adresse email suivante:

Walter.Turnbull@gmail.com

Prière de partager vos coordonnés: Téléphone(s) _____ _____

Adresse email: _____

Merci d'avance ! Pour le comité de sélection: Walter Turnbull - tel 4771 5538

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POINTS FORTS:

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POINTS FAIBLES:

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Votre prénom et nom	Votre signature	Date