

# APPLICATION FORM

## **RACIAL ETHNIC THEOLOGICAL EDUCATION SCHOLARSHIP**

Racial Ethnic Pastoral Leadership Program (REPL)

Synod of Southern California and Hawaii

Presbyterian Church (U.S.A.)

*Rev. Narcissis Tucker Bishop, Coordinator*

*Email ntucker@synod.org*

*Synod Web Page: <http://www.synod.org>*

*Synod Phone: (213) 483-3840 x 110*

**APPLICATION DEADLINE: OPEN**

**Name of Scholarship Applicant:** \_\_\_\_\_

### **PART IV: PRESBYTERY RECOMMENDATION**

#### **OR SESSION IF NOT UNDER CARE OF PRESBYTERY**

*The applicant has completed his/her part of this application and is asking for your recommendation. Please complete this form and e-mail it directly to the REPL Scholarship Committee, as shown at the end of this form, as soon as possible, as the application cannot be considered without this portion. The form will expand as you enter information; you may comment as much as you find necessary.*

#### **FOR PRESBYTERY COMMITTEE ON PREPARATION FOR MINISTRY OR COMMITTEE ON MINISTRY**

**Note: If applicant is preparing for Commissioned Ruling Elder (CRE), Certified Christian Educator, or other forms of approved ministry, and is not under care of the Presbytery, then the Clerk of Session must sign the application indicating approval by the Session.**

The student is an  Inquirer, a  Candidate for Teaching Elder (*Minister of the Word and Sacrament*) - or preparing for  Commissioned Ruling Elder (CLP), or  Certified Christian Educator,  Other, Please indicate \_\_\_\_\_

**Please state below the recommendation for the applicant:**

The  CPM  COM or  Session recommends the student for a scholarship:  Yes  No

Comments

Signature (\* typed signature is acceptable on this electronic form)

Position in Presbytery (or Session) \_\_\_\_\_

Name of Presbytery (or Session) \_\_\_\_\_ Date \_\_\_\_\_

Name of CPM or COM Moderator \_\_\_\_\_

**Or** Name of Clerk of Session if not under care of Presbytery: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ E-mail \_\_\_\_\_ FAX \_\_\_\_\_

**PLEASE SEND THE COMPLETED AND SIGNED FORM TO:**

**Racial Ethnic Pastoral Leadership Committee  
Synod of Southern California and Hawaii  
Attn: Rev. Narcissis Tucker Bishop, Coordinator  
14225 Roscoe Blvd., Panorama City, CA 91402  
(213) 483-3840 Fax (818) 891-0212  
E-mail: ntucker@synod.org**

**\*Please send completed form from the e-mail account of the person “signing” the form, in lieu of a signature.**

<b>FOR OFFICE USE ONLY:</b> Interview Date: _____ Action: _____ Amount: _____ Date Check Requested _____ Date Issued: _____
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Rev.1-3-2019 Part 4 appform)