

THE FOUNDATION FOR COLLEGE CHRISTIAN LEADERS  
APPLICATION COVER SHEET, 2021/2022

Applicant's Name \_\_\_\_\_

The following check sheet is to assist you in sending to us a complete application package. Incomplete packages will not be considered. Please answer the following carefully. This Cover Sheet is part of the Application and should be sent to us as well.

YES NO

- \_\_\_\_ \_\_\_\_ I have answered fully **all** questions and enclosed the basic application.
- \_\_\_\_ \_\_\_\_ I have completed and enclosed the **Leadership Assessment** form.
- \_\_\_\_ \_\_\_\_ My "**Ministry Reference**" has completed the form regarding my Christian leadership and that form is enclosed (not to be sent separately).
- \_\_\_\_ \_\_\_\_ My **Christian Testimony** is enclosed.
- \_\_\_\_ \_\_\_\_ My **essay** about where I see myself in one, three or five years is enclosed.
- \_\_\_\_ \_\_\_\_ I have enclosed the transcript(s) required by Item 12 of the basic application.
- \_\_\_\_ \_\_\_\_ If I have filed a Free Application for Federal Student Aid ("FAFSA") I have provided a copy of the page(s) from my "Student Aid Report" (SAR) which shows "Expected Family Contribution" (EFC).

If I have not filed a FAFSA or have not received an SAR or an EFC,

- \_\_\_\_ \_\_\_\_ I have enclosed pages 1 and 2 of **my parents' federal tax returns** for the past two years as well as pages 1 and 2 of **my federal tax returns** for the past two years.
- \_\_\_\_ \_\_\_\_ If my parents are divorced, I have enclosed pages 1 and 2 of **my step-parents' federal tax returns** for the past two years.
- \_\_\_\_ \_\_\_\_ If my parent/step-parent is in ministry and receives a "**Parsonage (or**

**housing) Allowance”** I have stated the annual amounts of same for the  
past two years.

I understand (1) the deadline for receipt by the Foundation of a fully completed application package is **May 17, 2021**, (2) if my application package is incomplete for any reason the Foundation is not obliged to notify me, and (3) the Foundation is under no obligation to consider an incomplete or late application package.

Date: \_\_\_\_\_

\_\_\_\_\_

Applicant's Signature

**This is the address to return your completed package:**

**2658 Del Mar Heights Road, PMB #266, Del Mar, CA 92014**