



CENTER *for* CHRISTIAN STUDY

Elzinga Residential Scholars Program

LIVE IN COMMUNITY. WORSHIP GOD. GROW IN KNOWLEDGE. SERVE OTHERS.

APPLICATION FORM

Please complete all sections of this application. If you have further questions about the ERSP, see <http://studycenter.net/ersp> or contact Lane Cowin (lane@studycenter.net) or Jay McCabe (jay@studycenter.net). There will be two rounds of applications. The first round of applications are due September 26th and will receive a decision no later than October 12th. The second round of applications are due by October 17th and will receive a decision no later than October 26th. We will reserve at least 2 spots in the men's house and at least 4 spots in the women's house for second round applicants. Some first round applicants may be deferred until the second round.

Complete this application form (please type or print) and drop it off with one of the Directors of Undergraduate Ministries (Jay McCabe or Lane Cowin) at the Study Center or mail it to the Center for Christian Study c/o Elzinga Residential Scholars Program, 128 Chancellor Street, Charlottesville, VA 22903. Make sure to provide all the required information and attach answers to the short essays.

All information will be kept confidential.

PERSONAL INFORMATION

APPLICANT'S FULL NAME

UVA EMAIL

HOME ADDRESS

CITY

STATE

ZIP

GENDER

BIRTHDAY

CELL PHONE

ETHNICITY

CITIZEN OF WHAT COUNTRY?

Have you ever been convicted of a felony?

YES NO

Do you have any physical limitations or special medical requirements?

YES NO

Are you on any long-term medication or have you ever been under the care of a professional for any ongoing medical or psychological difficulties?

YES NO

If yes to any of the above three questions, please explain below.

FAMILY INFORMATION

PARENT 1 NAME + RELATIONSHIP

PARENT 1 EMAIL ADDRESS

PARENT 1 HOME ADDRESS

PARENT 2 NAME + RELATIONSHIP

PARENT 2 EMAIL ADDRESS

PARENT 2 HOME ADDRESS (IF DIFFERENT FROM PARENT 1)

Siblings Name(s) and Ages:

CHURCH AND FELLOWSHIP INFORMATION

NAME OF HOME CHURCH

NAME OF CHURCH AT UVA.

WHICH GROUNDS FELLOWSHIP/MINISTRY ARE YOU INVOLVED IN, IF ANY?

HOW MANY HOURS A WEEK DO YOU SPEND WITH YOUR FELLOWSHIP?

Briefly describe your role as a leader within your group (if applicable):

UNIVERSITY INFORMATION

CURRENT YEAR AT UVA.

CURRENT GPA

MAJOR(S) (DECLARED OR UNDECLARED)

MINOR

Briefly list how you've spent your time outside of class so far at U.Va. and any additional commitments you anticipate having next school year. Include the average hours/week for each activity. These need not be in essay form (i.e. feel free to bullet), but be as complete as possible. (For example: -Star Wars Fan Club [2 hrs/wk]

SHORT ANSWER QUESTIONS

Please type your responses to the following questions on a separate piece of paper. Thoughtfully reflect on each question with 100-200 words. Please respond as honestly as possible. Your responses will be kept completely confidential.

1. Describe your spiritual journey and how the gospel impacts your life.
2. Where are you currently in ministry to others? Who do you especially have a heart to serve?
3. The Apostle, Paul, in 2 Corinthians 12, writes that “God’s power is made perfect in weakness” and he boasts of his weaknesses. How have you seen this principle reflected in your own life?
4. Why are you studying what you are studying?
5. Why do you want to participate in the Elzinga Residential Scholars Program?

CHARACTER REFERENCE

Please list one person who has been in some position of spiritual authority or care in your life (e.g., pastors, Grounds ministers, counselors, teachers, employers) and who will serve as a reference. Do not include peers or family members. This person will be asked to assess your character, maturity, and your desire to grow. Please choose someone who will be able to speak to all of these areas of your life. Please send your character reference this link, <http://bit.ly/ERSPreference>, to have them fill out a reference form online.

NAME OF REFERENCE

RELATIONSHIP TO APPLICANT

OCCUPATION

EMAIL

PHONE

CERTIFICATION

I certify that all of the information provided is true and correct to the best of my knowledge. I authorize the Center for Christian Study to make independent inquiry about me to assess my qualifications regarding this program.

SIGNATURE

DATE