



West Indies School of Theology

THE OFFICIAL TRAINING INSTITUTION OF THE PENTECOSTAL ASSEMBLIES OF THE WEST INDIES

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Bishop T. J. Nelson Memorial Scholarship

APPLICATION FORM

Applicant's Name: _____

PAWI Assembly: _____

Pastor's Name: _____

This application is accompanied by:

- (1) Pastoral recommendation []
- (2) Other recommendation []
- (3) Applicant's curriculum vitae []
- (4) Transcript []

Programme Enrolled: _____

Status: Part-Time [] Full-Time []

Church involvement: _____

Extra-Curricular activities involved in at WIST: _____

Applicant's Signature: _____ Date: _____

For official use

CHAIR, Scholarship Committee

CHAIR, Academic Committee

Vice President, Business Services

Date Received

Year of Award _____