

# THE W.B. SMALL TRUST

## APPLICATION FOR FINANCIAL ASSISTANCE

Please note that W. B. Small stated in his will that “beneficiaries shall be persons who believe in the fundamental principles of the Christian religion and in the Bible and who are endeavoring to promulgate the same.” Our recipients must meet these criteria. Therefore, an applicant must be a full-time Christian student working on a Masters of Divinity at an accredited seminary and have a strong Iowa connection. (\*Preference is given to Iowans since W.B. Small was an Iowa dentist and his money established this Trust.)

**Applications will be considered only if typed.**

### **PERSONAL INFORMATION**

Photograph

Name \_\_\_\_\_

Date/Place of birth \_\_\_\_\_

Home address \_\_\_\_\_

School address \_\_\_\_\_

Email address \_\_\_\_\_

Marital status \_\_\_\_\_ Number of dependents (not including spouse) \_\_\_\_\_

Outline your Iowa background \_\_\_\_\_

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### **WORK EXPERIENCE**

List the place of employment, length of time and brief description of job/jobs held in the past 10 years.

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**EDUCATIONAL INFORMATION**

Educational experience to date (include current enrollment)

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Educational objective \_\_\_\_\_

Number of additional years of education required \_\_\_\_\_

Seminary attending \_\_\_\_\_

**CHURCH MEMBERSHIP**

Name of Church \_\_\_\_\_

Address of Church \_\_\_\_\_

Sponsoring group, if any \_\_\_\_\_

**FINANCIAL CIRCUMSTANCES**

Source and amount of income for the school year 20\_\_ to 20\_\_:

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**Total:** \_\_\_\_\_

Estimated costs for school year 20\_\_ to 20\_\_:

- a. Tuition charges and fees \_\_\_\_\_
- b. Books and education expenses \_\_\_\_\_
- c. Other student expenses \_\_\_\_\_
- d. Housing costs \_\_\_\_\_
- e. Food costs \_\_\_\_\_
- f. Payments on indebtedness \_\_\_\_\_
- g. Other expenses (itemize) \_\_\_\_\_

**Total:** \_\_\_\_\_

Please outline the reason why you feel an assistance grant from the W.B. Small Trust would increase the effectiveness of your educational program.

Please list the extracurricular activities you carry along with your program of formal education.

Please attach three (3) letters of reference from persons whom you feel know you well and can give recommendations as to your character, scholastic performance, and need for financial assistance.

Please attach a copy of your latest transcript of your studies.

**PLEASE USE THE REVERSE SIDE TO SHARE WITH US A BRIEF STATEMENT DESCRIBING YOUR JOURNEY OF FAITH.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

If you have any questions, feel free to email us at: [joblut@mchsi.com](mailto:joblut@mchsi.com)

**COMPLETED APPLICATION MUST BE RECEIVED BY MAY 15. PLEASE SEND TO:**

**BOARD OF TRUSTEES  
THE W B SMALL TRUST  
2709 FAIRLANE AVENUE  
WATERLOO, IA 50702**