C&MA Undergraduate Grant Program
Nyack College--Nyack, NY

C&MA Pastor--Grant Application/Reference Form

The Christian & Missionary Alliance undergraduate grant program at Nyack College will provide tuition assistance to a C&MA student matriculating at Nyack College who is an active member or inherent of a C&MA Church. Eligibility for the grant program is determined by the applicant’s commitment and involvement in a C&MA church as verified by a pastor’s reference.

*Present this form to your C&MA pastor in the church you currently attend along with a pre-addressed postage paid envelope or have the completed form faxed directly by the Pastor to the Admissions Office.* (contact info below)

To be Completed by the C&MA Applicant:

Last Name________________________________First Name ____________________________

Please sign below if you wish to waive your right under the Family Educational Right and Privacy Act of 1974 to access this recommendation.

Signature:_________________________________________ _____________Date____________

To be Completed by C&MA Reference:

The above named applicant is applying for the C&MA undergraduate grant program at Nyack College and requires the completion of this reference form to determine eligibility.

1. How long have you known the applicant?__________________________

2. What is the nature of your relationship?__________________________

3. Describe the applicant’s past and current involvement in C&MA ministries in your church including extent of participation and length of time as an active member or adherent.

   _______________________________________________________________

4. To the best of your knowledge does the applicant show evidence of current commitment to the ministries of the C&MA?__________________________

Please provide any additional information that may assist Nyack College in determining the applicant’s eligibility for the C&MA undergraduate grant program:

Your evaluation of the applicant’s eligibility for the C&MA undergraduate grant program:

Approve_____Not Approve_____        Reason__________________________________________

Name__________________________________________________Title____________________________

Church Name________________________________________C&MA District_________________________

Address of Church____________________________________________________

Contact Information—Phone____________________Email____________________________

Signature_________________________________________ _____________Date________________

Return complete form to:
Office of Admissions--Nyack College
1 South Boulevard – Nyack, NY  10960-3698
1-800-33-NYACK or Fax 845-358-3047