



Senior Leader Scholarship Application

Date Submitted: _____

Ministry Senior Leader Name: _____

Ministry Name: _____

Is this a congregation or a ministry? _____

Mailing Address: _____

City/State/Zip/Country: _____

Phone: _____

Cell: _____

Email: _____

Website: _____

Please explain how you're involved within the Messianic Jewish Community: _____



Messianic Leadership Roundtable mlr@jewishvoice.org Fax: 602.971.6486

If your ministry is a CONGREGATION, please answer the following:

How many adults do you have in regular attendance on average? _____

How many of those adults are Jewish and attend regularly? _____

How often do you meet? _____

Where do you hold your weekly Shabbat service (Own Building, Church, Home, etc)?

When was your congregation established? _____

Do you associate with One Law, Two House, or Ephraimite Theology? _____

Are you incorporated at a local, state, or federal level and meet criteria for a 501(c)3 tax exemption, including filed constitution and bylaws, OR if outside the U.S., are you officially registered as an entity with the government and in compliance with the country's regulations? Yes ☐ No ☐

If your ministry is PARA-CONGREGATIONAL, please answer the following:

Explain how you're actively engaged in the following:

- How often do you have meetings, outreaches and/or events? _____
- How often do you publish and distribute literature targeting a Jewish audience?

- How often do you teach and distribute material targeting a Jewish audience?

- How often do you distribute humanitarian aid or conduct advocacy programs that target impoverished Jewish people? _____
- How often are you booked as a musician/worship leader? _____

How many full-time staff members do you have in addition to the ministry leader? _____

When was your ministry established? _____

Are you incorporated at a local, state, or federal level and have you received a 501(c)3 tax exemption OR if outside the U.S., are you officially registered as an entity with the government? Yes ☐ No ☐

****Please attach any other information you would like us to know for consideration****

Please sign below, agreeing that the information provided above is correct:

Printed Name

Signature



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