



# Womenary Application for the Jan Kerr Crowe Scholarship Fund

Please Complete the following:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Semester for which you are applying: \_\_\_\_\_

How much (if any) of the registration fee are you able to pay? \_\_\_\_\_

What do you desire to gain from the class? \_\_\_\_\_

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If you are involved in ministry in your church or community, please describe in what capacity you serve. \_\_\_\_\_

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Please return to: Womenary  
410 Rudman Road  
Tyler, Texas 75701