

FBC SCHOLARSHIP APPLICATION FOR THE _____ SEMESTER

INFORMATION TO SCHOLARSHIP APPLICANTS:

1. YOUR APPLICATION, COMPLETED AND SUBMITTED PRIOR TO THE PUBLISHED DEADLINE FOR THE COMING SCHOOL YEAR, WILL BE CONSIDERED BY THE SCHOLARSHIP MINISTRY TEAM OF THE FIRST BAPTIST CHURCH (SMT).
2. THE SMT CURRENTLY HAS TWO FUNDS WHEN MEETING TO CONSIDER WHETHER OR NOT TO AWARD A SCHOLARSHIP OR SCHOLARSHIPS:
 - A. THE JOEL LAUGHLIN MEMORIAL FUND/HOWARD PAYNE/BAPTIST GENERAL CONVENTION OF TEXAS (HP/BGCT) - USED ONLY FOR AWARDS TO STUDENT(S) ATTENDING HOWARD PAYNE OR OTHER BGCT SCHOOLS.
 - B. THE ENDOWED SCHOLARSHIP FUND - MAY BE USED FOR AWARDS TO STUDENT(S) ATTENDING HOWARD PAYNE OR OTHER BGCT SCHOOLS, OR ANY ACCREDITED COLLEGE, UNIVERSITY, JUNIOR COLLEGE, TECHNICAL SCHOOL, OR BUSINESS SCHOOL.
3. THE SMT MEETS EACH YEAR TO CONSIDER THE FUNDS AVAILABLE AND THE APPLICATIONS RECEIVED. THE SMT MAY DETERMINE THAT NO FUNDS BE DISTRIBUTED OR THAT FUNDS BE AWARDED FOR THE COMING SCHOOL YEAR. IF FUNDS ARE TO BE AWARDED, THERE IS NO PROVISION THAT ALL APPLICANTS WILL RECEIVE AN AMOUNT OR EQUAL AMOUNTS.
4. IN ORDER TO APPLY YOU MUST HAVE BEEN AN ACTIVE MEMBER OF FIRST BAPTIST CHURCH, GOLDTHWAITE, FOR AT LEAST ONE YEAR.
5. IN ORDER TO APPLY YOU MUST PLAN TO BE ENROLLED FOR A MINIMUM OF 12 HOURS PER SEMESTER.
6. THE APPLICATION IS TO BE FILLED OUT BY THE STUDENT AND SIGNED IN WRITING BY THE STUDENT (NO ELECTRONIC GENERATED SIGNATURES).

NAME _____ BIRTHDATE _____

ADDRESS _____ TELEPHONE _____

PARENTS _____ SCHOOL _____

CLASSIFICATION _____

ESTIMATED EXPENSES:

TUTION _____ BOOKS _____

ROOM & BOARD _____ FEES _____

DO YOU PLAN TO WORK _____ IF SO, WHERE _____

OTHER SCHOLARSHIPS APPLIED FOR OR RECEIVED AND AMOUNT PER SEMESTER _____

NUMBER OF HOURS YOU ARE TAKING THIS SEMESTER _____

IF ENTERING FRESHMAN YEAR: ACT _____ SAT _____ AND ATTACH A COPY OF TRANSCRIPT OF HIGH SCHOOL, OR THE LAST SEMESTER OF YOUR COLLEGE GRADES.

GRADE POINT AVERAGE LAST SEMESTER _____ PREFERRED MAJOR IF DECIDED _____

6. WRITE A PARAGRAPH OF LIST YOUR AIMS AND AMBITIONS.

7. WRITE A PARAGRAPH OR LIST YOUR HIGH SCHOOL, POST HIGH SCHOOL, CHURCH AND COMMUNITY ACTIVITIES.

8. WRITE A PARAGRAPH OR LIST REASONS WHY YOU THINK YOU NEED THIS SCHOLARSHIP.

MY SIGNATURE INDICATES THAT I HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED ABOUT THE SCHOLARSHIP FUNDS AND PROCEDURES, THAT I MEET ELIGIBILITY REQUIREMENTS, AND THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND CORRECT.

SIGNATURE OF APPLICANT

DATE

THE SCHOLARSHIP MINISTRY TEAM MAINTAINS THE RIGHT TO MAKE EXCEPTIONS TO THESE GUIDELINES. APPLICATIONS RECEIVED AFTER THE DEADLINE MAY RESULT IN REDUCTION OR ELIMINATION OF ANY FUNDS BEING GIVEN TO THE APPLICANT.