SCHOLARSHIP APPLICATION

Fill out completely and return to: First Baptist Church
1325 Augusta Street
Bluefield, WV 24701-3807

Name_____ Date of Birth_____

Address_____ Social Security #_____

City _____ State_____ Zip_____

Name of parent or guardian_____

Address of parent or guardian_____

Occupation of Parent(s)_____

College/University/Seminary you plan to attend_____

Complete Address of that school's financial aid office (check to be remitted to this address:)

Are you a faithful, active member of First Baptist Church?_____

Do you regularly attend and participate in Church activities? Please, list.

Toward what vocation will you be preparing?_____

For what scholarships are you applying?_____

What will be the approximate cost of books for the year?_____ Tuition and room/board?_____

List other scholarships and amounts_____

Do you have: 1) Savings Account_____; 2) Checking Account_____

3) Part-time/full time employment (where)_____

4) Other sources of income_____

Please attach a statement of your school activities; grade point average; community involvement; commitment in acquiring an education; and how you intend to utilize your education (life goals).

After you are gainfully employed, would you, if possible, contribute to scholarship funds so that others would also have opportunities to further their education and improve their quality of life?

Check: Yes_____ No_____

_____ _____
(Signature) (Date)

_____
(Parent Signature)

Revised 03/02/93)