

**FIRST BAPTIST FOUNDATION
300 WEST MAIN STREET
DOTHAN, AL 36301**

APPLICATION FOR SCHOLARSHIP

Please print and fill every blank with the appropriate or applicable wording. Failure to comply on this point will void the application and make it of no effect. PLEASE RETURN APPLICATION TO THE BUSINESS OFFICE OF FIRST BAPTIST CHURCH.

Date _____

Applicant's Name _____

DOB _____

Address _____ City _____ State _____ Zip _____

Prior to the academic year for which this scholarship is requested, have you ever been enrolled in any school beyond the high school level? _____

Please list the highest level of education and list schools attended:

High School

College/University/Vocational Institution:

_____ Years _____

_____ Years _____

_____ Years _____

Graduate School:

_____ Years _____

**First Baptist Foundation
Application for Scholarship**

College School you plan to attend:

_____ Term _____

When do you expect to Graduate (Semester/Year) _____

School now attending or last attended _____

College GPA _____

Graduate Test Scores, i.e. GRE _____ MAT _____ Other _____

Under-Graduate School Activities:

Honors

Church affiliations for last ten years/Church activities

State your scholastic Major: _____

Reason for choosing this field: _____

Intended Enrollment: _____ Full-Time _____ Part-Time _____ Online

If Part-Time, how many expected hours per semester: _____

Are you a recipient of any donation, gift or scholarship? _____ If so, how much? _____

Anticipated cost of tuition per semester: _____

Anticipated cost of books per semester: _____

**First Baptist Foundation
Application for Scholarship**

Father's Name _____ Address _____

Occupation _____ Phone _____

Employed by _____ Phone _____

Church Affiliation _____ Since _____

Mother's Name _____ Address _____

Occupation _____ Phone _____

Employed by _____ Phone _____

Church Affiliation _____ Since _____

I (we) hereby submit answers to the above questions as part of my application to the First Baptist Foundation for a student scholarship, and the Foundation shall rely on those answers as being true and correct to the best of my (our) knowledge and belief.

Signature of Parent, Guardian or Spouse

Signature of Applicant (Student)

Signature of Parent, Guardian or Spouse