

**BAPTIST MINISTERS' CHILDREN
SCHOLARSHIP APPLICATION**

NAME OF STUDENT: _____ Student ID _____

ADDRESS: _____

MINISTER'S NAME: _____

ACTIVE AND IN FULL-TIME SERVICE? YES _____ NO _____

IF NO, PLEASE EXPLAIN: _____

NAME OF CHURCH, ADDRESS, AND PHONE: _____
(if retired, list previous church)

RELATIONSHIP OF MINISTER TO STUDENT: _____

Student's Signature

Date

**PLEASE ATTACH A SEPARATE LETTER STATING WHERE YOU SERVE,
HOW LONG YOU HAVE SERVED, AND WHAT POSITION YOU HOLD**

THANK YOU