

Bethlehem Baptist Church Trustee Emeritus Scholarship Application



Contact Information

Student Name	
Parent Name	
Street Address	
City, State, Zip Code	
Home Phone	
Cell Phone	
E-Mail Address	

BBC Member info

How many years have you been a member of Bethlehem Baptist Church? _____

Ministry Involvement

Tell us about your BBC ministry involvement

- Church School
- Youth Choir
- Youth Usher
- Sunday School Extras
- Youth Worship Leader
- Praise Dance Team
- Other (Please list)

High School Info

Name	
Street Address	
City, State, Zip Code	
GPA	
Graduation Date	

College Info

Name	
Street Address	
City, State, Zip Code	
Major	
Anticipated Start Date	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am selected to receive this scholarship, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate disqualification for this scholarship.

Name (printed)	
Signature	
Date	

Our Policy

Personal information is considered confidential between the Trustee Ministry Scholarship Committee and applicant. No personal information will be forwarded to other ministries or individuals within Bethlehem Baptist Church.