**Guidelines**

* To be eligible for the Shirley Hale Scholarship, applicants must meet all of the requirements.
* Incomplete applications will not be considered for evaluation.
* Applications must have authentic original signatures. Faxes will not be considered for evaluation.

**Requirements**

* Must be an active member of FBC, and an active participant of Christian Education classes (Sunday School or Bible Study), for the past year
* Must be a prospective or high school graduate in the year of application.
* Must use funds for undergraduate studies or school.
* Must have a cumulative overall grade point average (G.P.A.) of 2.5 or above.
* Submit ALL documentation and copies of registration as a student.
* Completed application and supporting materials are due in to FBC office by If you prefer to submit your completed application and supporting materials via mail, the package must be **postmarked** by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application Summary (all materials must be submitted at one time)**

* All applications must be **typed** or **clearly printed** in blue or black ink.
* **Every blank** in the scholarship application **must be completed**. This includes a complete address and zip code. If a particular portion of the application does not apply to the applicant, **N/A** should be placed on the blank.
* All applications must include an **official high school transcript**.
* Applicants must submit **two** (2) **letters of recommendation** (recommenders cannot be related to applicants):
  + One letter of recommendation from the Pastor, Sunday School Superintendent, or person within the church leadership who knows the spiritual stewardship of the applicant.
  + The second letter of recommendation must be from a current/ former teacher, guidance counselor, principal who knows the academic capabilities of the applicant. **Include the two (2) letters of recommendation in sealed envelopes with your completed application.**

**Policies/Procedures**

* The committee will evaluate each applicant based on the guidelines adopted.
* Scholarships will be awarded annually provided the funds are available.
* Recipients of a scholarship must enroll and remain in a school of higher learning for the entire quarter, semester, and/or school year. If not, funds will be forfeited and must be returned to First Baptist Church of Madison. If there are mitigating circumstances that a recipient has no control over, the scholarship award will be reinstated.

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| APPLICANT INFORMATION | | | | | | | | | | | | | | | | | |
| **Full Name:** | | |  | | | | |  | |  | | **Date of Birth (mm/dd/yyyy:** | | | |  | |
| **Last** | | | | | | | | **First** | | **M.I.** | | | | | | | |
| **Address:** | | |  | | | | | | | | | | |  | | | |
| **Street Address** | | | | | | | | | | | | | | **Apartment/Unit #** | | | |
|  |  | | | | | | | | | | | | |  |  | | |
| **City** | | | | | | | | | | | | | | **State** | **ZIP Code** | | |
| **Phone:** | | ( ) | | | | | **Email Address:** | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| EDUCATION | | | | | | | | | | | | | | | | | |
| **High School:** | | | |  | | | | | | | | | | | | | |
| **Name of High School** | | | | | | | | | | | | | | | | | |
| **Address of High School:** | | | | |  | | | | | | | | | | | | |
| **Street Address or P.O. Box** | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | |  | | | |  | | |
| **City** | | | | | | | | | | | **State** | | | | **ZIP Code** | | |
| **Phone:** | | ( ) | | | | **Expected Date of Graduation (mm/dd/yyyy):** | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | |
| CHURCH INVOLVEMENT | | | | | | | | | | | | | | | | | |
| List church related activities involved | | | | | | | | | | | | | | | | | |
| 1. | | | | | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | | | |
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| APPLICANT’S CERTIFICATION AND PERMISSION TO RELEASE INFORMATION | | | | | | | | | | | | | | | | | |
| * **I hereby certify that all information submitted on this application is true and accurate to the best of my knowledge.** * **I understand that submitting nonfactual information will automatically disqualify me from consideration for all scholarships.** * **By submitting this application, I authorize my high school to make information concerning my academic records available to the First Baptist Church of Madison, Madison, NJ 07940**   **Applicant's Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Parent’s/Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | |

Please attach:

(1) Official High School Transcript

(2) Acceptance Letter from Institution of Higher Learning of your choice

(3) Proof of College Enrollment