New Scholarship Application White Rock Baptist Church Academic Year 2024-2025 DEADLINE DATE: April 22, 2024

Personal Data

Name Last	First	Middle
Address		
Street Address or Pos	st Office Box	
Telephone Home:		Cell:
Email:		
High School		
High School City and State		
College/University (attending/	applied to)	
Dates of Attendance:		
School Address		
Field of Study		
Grade Point Average (attach a	copy of official transcript)	
Class Standing]	Enrollment Status
Entering First Year		
Sophomore		Part-time
Junior		Full-time
Senior		
Graduate School: First year _	Seco	ond year
Indicate the semester(s) you not	eed assistance	
Parent(s)/Guardian(s):		

PLEASE ATTACH A 300 WORD ESSAY RESPONDING TO THE FOLLOWING PROMPTS: Please Address Your Church Related Involvement / Activities _____

List extracurricular activities you have participated in during the last year (athletics, part-time work, public service, community involvement, etc.); A personal statement or any additional information you want the Scholarship Committee to consider.

Why did you select your college major or curriculum program?_____

PLEASE SUBMIT YOUR MOST RECENT TRANSCRIPT AND A DIGITAL PHOTO.

CONFIDENTIALITY: All of the information revealed in these applications will be kept completely confidential and is the property of the White Rock Baptist Church.

For federal income tax purposes, scholarship awards are nontaxable as long as (1) the recipient is a degree candidate, (2) a condition of the award is that the money must be used for "qualified tuition and related expenses" (tuition and enrollment fees, books, supplies, and equipment required for courses, but not room and board or incidental expenses), and (3) the recipient establishes that the money was actually used for the intended purposes.

STIPULATION: As a recipient of a White Rock Scholarship, I feel I have certain obligations to my church to complete as much education as possible in the field of my endeavor. It is my understanding that I will receive a check in the first and second semesters of my education. In the event I decide not to continue in the second semester, I will notify the church immediately, and I will return the scholarship money, if same has been disbursed to me.

My signature indicates that the information is this application and any supporting document(s) is true and correct to the best of my knowledge.

Applicant's Signature:

Parent's Signature:	Date:
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