

True Vine Baptist Church Scholarship Application

Dr. Jesse Grice, Sr. Pastor/Founder



**ALL APPLICANTS MUST BE A MEMBER OF TRUE VINE BAPTIST CHURCH FOR A MINIMUM OF 1 YR
AND CURRENTLY OR HAVE BEEN ACTIVE IN AT LEAST ONE MINISTRY**

1	Last Name:	First Name:
	Mailing Address:	
2	City:	State: Zip Code
3	Cell Phone #:	
3	Email Address:	
4	High School Attended:	
5	Graduation Date:	
6	What College/University/Vocational School will you be attending? School: _____ School Address: _____ <hr style="border: 1px solid black;"/> School Phone Number: _____	
7	Grade Point Average (GPA): _____ (on a 4.0 scale)	
8	Name & Address of Parent(s) or Legal Guardian(s): _____ <hr style="border: 1px solid black;"/> Street: _____ City: _____ State: _____ Zip: _____ Home / Cell phone # of Parent(s) or Legal Guardian(s): _____	

Please provide the following information on a separate sheet if needed

9	SCHOOL EXTRA-CURRICULAR ACTIVITIES/ORGANIZATIONS: Please list school extra-curricular activities/organizations in which you have participated. Note leadership roles and dates.
10	AREA OF STUDY/CAREER GOALS: What do you want to study and why?
11	MINISTRY PARTICIPATION – TRUE VINE BAPTIST CHURCH: Please list ministries at TVBC in which you are now active or have previously been active. Note leadership roles and dates.
12	Please explain how your participation in church ministry has equipped you to pursue your goals in life.
13	RECOGNITIONS: Please list important awards and recognitions received. Note organization presenting honor and date.
14	The following items must be attached to this application in order for the application to qualify to be reviewed. Your application will be returned to you if these items are not attached to this application. (NO EXCEPTIONS) Please Circle “YES” or “NO” below to be sure you have attached each item as required.
	YES NO Two references regarding your character, school and/or work history, ministry participation ** Please do NOT request a reference from Pastor Grice**
	YES NO Proof of school acceptance and student ID number is required for receipt of funds. Funds will be mailed to financial aid office on your behalf. If NO – Please Explain? _____ (i.e.: have not decided / have not received / waiting on reply)
	YES NO Most recent high school transcript – Proof of GPA
	YES NO Picture of yourself in Cap and Gown
	YES NO Answers to questions 1-13

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me to the True Vine Baptist Church SA Scholarship Committee is true, correct and without forgery. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Scholarship Program.

I hereby understand that if chosen as a scholarship winner, according to scholarship policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: _____ Date: _____

**Return Completed Scholarship Packet to the TVBC Information Desk / TVBC Executive Office
Attn: Sis Gwen Edwards
not later than APRIL 30, 2019**