

**AMERICAN BAPTIST WOMEN'S MINISTRIES OF NEW YORK STATE
APPLICATION FOR SCHOLARSHIP**

APPLICATIONS AND PERTINENT DOCUMENTS MUST BE POSTMARKED BY MARCH 1st.

APPLICANTS WILL NOT BE CONSIDERED AFTER THAT DATE!

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED!

New _____ Renewal _____ Date of Application: _____

FAMILY INFORMATION

Student's Name: _____ Date of Birth: _____

Address:

_____ Street _____ City _____ State _____ Zip Code _____

Student's (Cell) phone #: _____ Email: _____

Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

Parent's Phone #: _____

Spouse's Name: _____ Occupation: _____

Other dependents in the family (name, relationship, age and if in college):

CHURCH INFORMATION

Name of American Baptist Church where member: _____

Date Baptized: _____ Date joined church: _____

Church Address:

_____ Street _____ City _____ State _____ Zip Code _____

CURRENT CHURCH /COMMUNITYACTVITIES:

AT HOME

OR

AT COLLEGE

RECOMMENDATIONS FROM THE FOLLOWING PEOPLE SHOULD BE SUBMITTED TO THE SCHOLARSHIP COMMITTEE CHAIRWOMAN BY MARCH 1ST.
Please list their names and addresses

IF IN HIGH SCHOOL:

1. Pastor: _____

2. Guidance Counselor

IF IN COLLEGE:

1. Campus Pastor: _____

2. Faculty Member in Major Field of _____

3. An adult (outside your family) who knows you well:

LIST ANY WORK EXPERIENCE:

Year	Type of Work	Dates Employed	Earnings (per hour/per year)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I recognize this scholarship to be a gift of the American Baptist Women's Ministries of New York State for the purpose of helping me to prepare for life work. Therefore I will endeavor to give back in Christian service the best I have. I desire to follow Christ and to discover His will for my life. I will work to prepare myself toward this end. I understand that this scholarship carries an obligation to serve in church-related activities, preferably of the American Baptist Churches USA.

Signature of Applicant

**APPLICATIONS AND PERTINENT DOCUMENTS MUST BE POSTMARKED BY MARCH 1ST.
APPLICANTS WILL NOT BE CONSIDERED AFTER THAT DATE!
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED!**

All applications and documents should be mailed to the Scholarship Committee:

Irene Ingram
24 Timothy Court
Rochester, N.Y 14623

Phone: 585-334-2633
Email: isingram@rochester.rr.com