



**Fred Luter, Jr. Senior Pastor**

**Exalting, Equipping, Evangelizing**

## FRANKLIN AVENUE BAPTIST CHURCH SCHOLARSHIP CHURCH ATTENDANCE "WATCH CARE" VERIFICATION

**TO THE STUDENT:** This form must be completed and signed by the Pastor of the Church where you have joined and are attending under watch care.

**TO THE PASTOR:** Thank you in advance for taking the time from your busy schedule to verify church attendance for our student who is attending your church while away from home. We do appreciate you receiving a member of the Franklin Avenue Family, as well as, extending the spiritual nurturing and fellowship necessary for continued growth in the faith.

\_\_\_\_\_  
Student's Name (Please Print)

\_\_\_\_\_  
Name of Pastor (Please Print)

\_\_\_\_\_  
Name of Church

( ) \_\_\_\_\_  
Church Phone Number

\_\_\_\_\_  
Church Address (Street Number, City, State, Zip Code)

**Student regularly attends church service.**  Yes  No.

**(Optional)** Use space below to express any additional comments, if you desire to do so. Attach an additional sheet if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Pastor's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**\*\*Please place this form in your church's letterhead envelope, seal it and mail or return it to the student. The document must be received in the sealed envelope by the July 4<sup>th</sup> deadline\*\***