



Fred Luter, Jr. Senior Pastor

Exalting, Equipping, Evangelizing

Check List: Please place a check mark in the box for each item you've completed, and place your initials on the line by each item.

- _____ I have been Baptized (according to the Baptist Faith).
- _____ I have been a member of FABC for at least one (1) year.
- _____ I have completed all required sections of this application.
- _____ I have attached a picture.
- _____ I have requested that my High School mail my academic transcripts to FABC, and I will follow-up with my school to confirm that the transcript has been mailed.
- _____ I have requested my High School Teacher to complete the Recommendation Form, and **I have enclosed the form with this application.**
- _____ I have enclosed with this application my College Acceptance Letter.
- _____ I have attended Sunday School and/or Bible Study on a regular basis.
- _____ I have requested my FABC Sunday School or FABC Bible Study teacher to complete the Attendance Confirmation Form, **which I have enclosed with this application.**
- _____ I have received and read the Scholarship Information Sheet which outlines my requirements.
- _____ I have signed this application.
- _____ I am submitting all required documents by the posted Deadline Date (see below).



2019 HIGH SCHOOL GRADUATES SCHOLARSHIP APPLICATION

Please remember to request your High School to mail your official academic transcript to the address below. Also, make sure all required documents are submitted to FABC Scholarship Committee timely. Incomplete applications or applications for which required documents are missing will not be considered.

**All information/documents must be received by
June 15, 2019 WITHOUT EXCEPTION.**

(APPLICATION MUST BE COMPLETED AND SIGNED BY STUDENT & PARENT)

Please print or type. You must complete all four pages of this application.

1. Name _____
Last First Middle
2. Male Female 3. Single Married
4. Mailing Address _____
Street City State Zip Code
5. Permanent Residence (if different from above) _____
Street City State Zip Code
6. Cell Phone: () _____ 7. Home Telephone () _____
8. E-Mail Address (student's email only) _____
9. Date of Birth: _____ 10. City & State of Birth _____
11. Parent(s) or Guardian (s) _____
Parents' Address (if different from above) _____
Street City State Zip Code
Parent's Cell Phone: () _____ Home Telephone () _____
Parent's E-Mail Address _____

NOTE: It is the student's responsibility to make sure all documents are submitted timely, and/or follow-up with the representatives who will submit documents on your behalf (i.e. Contacting your High School regarding your academic transcript, and/or your Sunday School or Bible Study Teacher, etc.)

To the best of my knowledge, all information provided in this application is true and accurate.

Student's Signature Date

Parent's Signature Date

**MAIL TO:
FRANKLIN AVENUE BAPTIST CHURCH
SCHOLARSHIP COMMITTEE
8282 I-10 SERVICE ROAD SOUTH
NEW ORLEANS, LA 70126**

