

Mount Zion Baptist Church Scholarship Ministry

**P.O. Box 3623
Seattle, WA 98124-3623**

SCHOLARSHIP MINISTRY APPLICATION FORM

HIGH SCHOOL (2010 Graduate) **AND** **NEW APPLICANTS** (First time applying for a Mount Zion Scholarship)

*******Scholarship Requirements*******

Check

- 1. Member Mount Zion Baptist Church at least two (2) years _____
- 2. Minimum 2.5 GPA _____
- 3. Attend church regularly _____
- 4. Active in church activities _____

The application must include:

Most recent official sealed transcript (2010) _____

THREE signed recommendations – (1) **Academic**, (1) **Church** and (1) **Personal** _____

CONTINUING EDUCATION (Currently enrolled, or will attend: 4yr, 2yr, Graduate program, or vocational institution)

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- 2. Minimum 2.5 GPA _____
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- 4. Active in church activities _____

The application must include:

Most recent official sealed transcript _____

ONE - Current signed **Academic** recommendation _____

PLEASE, NO EXCEPTIONS! The Scholarship Ministry will ONLY accept applications sent to the P.O. Box by the deadline. Applications left in the church office, Scholarship Ministry church mailbox, or given to a Ministry member will not be accepted for consideration under any circumstances.

- Application postmark deadline **in the Post Office Box** is **Monday, June 28, 2010**. **NO EXCEPTIONS!** Applications, recommendations and official sealed transcripts will not be considered after the deadline. **The Scholarship Ministry will not be responsible for incomplete application packages or information sent separately.**
- You will receive notice of the status of your application by **Friday, July 9, 2010**.
- Presentation of your scholarship award will be done at both services on Scholarship **Sunday, July 18, 2010**.

Questions? Please contact Co-Chairs: Christine Jordan-Bell, (425-357-8929) or Linda Henry, (425-868-8591).

MOUNT ZION SCHOLARSHIP MINISTRY APPLICATION FORM

Please complete the following information (type or print):

Name First Middle Last

Street address including Zip Code

Telephone Including Area Code Date of Birth (Month/Day/Year)

Name of Parents - Guardian - Next of Kin

Address, including Zip Code

Telephone, including Area Code

Name and location of institution you will attend during 2010-2011

Major course of study:

Most recent cumulative GPA May we announce your GPA to the congregation and in the ZionNews? Yes No

Please check all that apply. During the 2010-2011 school year (per semester/quarter) will you be enrolled as a:

Full-time student (12 or more credits)? Part-time student (less than 12 credits)?

Graduate student Community College Vocational Education student

Have you previously received a Mount Zion Scholarship Ministry award? Yes No

A criterion for receiving a scholarship is membership of at least two full years in Mount Zion Baptist Church. In what year, month were you given the right hand of fellowship to become an official member of the church?

Do you attend worship service, prayer meeting or Bible Study 2-4 times a month? Yes No If your answer is no, please briefly explain why.

I certify that all statements that I have provided are true.

Signature of Applicant Date

Note: Scholarship awards for tuition and books will be made payable to the institution after verification of enrollment. MONEY NOT USED FOR PAYMENT OF TUITION AND BOOKS WILL BE RETURNED TO THE SCHOLARSHIP MINISTRY.

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ACTIVITIES

CHURCH ACTIVITIES: _____

COMMUNITY AND/OR SCHOOL ACTIVITIES: _____

COMMUNITY AND/OR SCHOOL AWARDS OR HONORS: _____

We hope that recipients and their family will express appreciation for the work of the Scholarship Ministry by doing one, or more, of the following:

	Yes	No	Comment
1. Make a financial contribution to the Scholarship Ministry.	_____	_____	_____
2. Buy a minimum of two tickets for fundraising events.	_____	_____	_____
3. Provide an item of worth for a fundraising event.	_____	_____	_____
4. Donate a homemade dessert for an event.	_____	_____	_____
5. Volunteer to accept a work assignment before, during, or, after a Scholarship Ministry event.	_____	_____	_____
6. Volunteer to accept a Scholarship Sunday assignment.	_____	_____	_____
7. Become a member of the Scholarship Ministry.	_____	_____	_____

Name: _____

Address: _____

Contact Phone Numbers: _____

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Academic Recommendation

GUIDELINES: Select a person who has been your teacher, principal, professor, advisor, counselor, etc. The *signed* recommendation should address your academic performance. Information may include their knowledge of your classroom performance, accomplishments, initiative, academic honors, and the personal characteristics that have contributed to your academic success.

_____ ,
is applying for a scholarship award from the Mount Zion Baptist Church Scholarship Ministry.

The applicant has requested that your recommendation speak to his/her academic abilities, i.e., grades, academic potential, special abilities, study habits, interest in school activities, etc.

In addition, please provide the Scholarship Ministry with the following information:

1. Your relationship (not a relative or fellow student) to the applicant. The recommendation should be from a person listed in the above Guidelines.
2. Length of time you have known the applicant:

Please provide your *signed* recommendation to the applicant so that it can be forwarded to the Scholarship Ministry no later than **midnight June 28, 2010**. The recommendation can also be sent by the June 28, 2010 deadline directly to:

Mount Zion Baptist Church Scholarship
P.O. Box 3623
Seattle WA 98124-3623

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Church Recommendation

GUIDELINES: Select a person who can tell of your participation with him/her in a church ministry or activity. The *signed* recommendation may come from your Sunday school or Bible study teacher, choir director, pastor, ministry head, etc. The writer may include their knowledge of your dependability, leadership, commitment, enthusiasm and personal characteristics that have contributed to your spiritual growth.

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The applicant has requested that your recommendation speak to his/her participation church related organizations and activities.

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2. Length of time you have known the applicant:

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Personal Recommendation

GUIDELINES: Select a person who is acquainted with your personal qualities. The *signed* recommendation may come from a friend, neighbor or employer; but not a family member, fellow student or person from your academic life. The person may include their knowledge of your sense of responsibility, kindness, helpfulness, ability to get along with others, sense of humor, etc. that have contributed to your personal development.

_____ is applying for a scholarship award from the Mount Zion Baptist Church Scholarship Ministry.

The applicant has requested that your recommendation speak to his/her personal qualities, i.e. sense of responsibility, kindness, sense of humor, ability to get along with others, emotional maturity, etc.

In addition, please provide the Scholarship Ministry with the following information:

1. Your relationship (not a relative or fellow student) to the applicant. The recommendation should be from a person listed in the above Guidelines.
2. Length of time you have known the applicant:

Please provide your *signed* recommendation to the applicant so that it can be forwarded to the Scholarship Ministry no later than **midnight June 28, 2010**. The recommendation can also be sent by the June 28, 2010 deadline directly to:

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