

**2018 LOUIS CARTER
SCHOLARSHIP AWARD
APPLICATION**

APPLICATION DUE DATE MAY 6, 2018 (at 12:30 P.M.)

**ST. PAUL BAPTIST CHURCH
3996 14TH Avenue
Sacramento, CA 95820
(916) 737-7070
Dr. Ephraim Williams, Pastor**

If you elect to mail your scholarship packet, please mail to:

**ST. PAUL BAPTIST CHURCH
Scholarship Committee
P.O. Box 5260
Sacramento, CA 95817-0260**

Please Note: Incomplete applications WILL NOT be processed.

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Introduction

These forms are to bring together all essential information about you. This information will be used only in regard to scholarship screening. Be assured that all information will be held in complete confidence.

Criterion

The Louis A. Carter Scholarship Award is designed for college students who will be juniors with a Business Major. Only St. Paul members may apply. Our aim is to assist deserving students with books and tuition only. Please be aware that your choice of institution will have no bearing on the amount of scholarship you may receive. Parents are responsible for the education of their children. This Scholarship is a token of our love and desire to help you reach your goal.

Candidate will be judged in the categories listed below:

1. Church Activities
2. School Activities
3. Essay Packet
4. Awards
5. Honor Roll
6. Community Service

Requirements

1. Applicant must be a member of St. Paul Baptist Church in good and regular standing.
2. Applicant will be entering their junior year of college with a major in business.
3. Applicant must be a full-time student carrying at least 12 units or more.

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email Address _____

Name of School: _____

What college, university or school of specialization have you attended/or are attending?

What was your field of study within the business major? _____

Please explain why you have chosen your major field of study?

Please explain the adverse obstacle you have overcome.

SCHOOL ACTIVITIES

(Limited to school year 2017-2018)

All School Activities must have a letter of verification from a counselor or advisor. Two (2) points will be given for each activity. If more than five (5), the maximum given will be ten (10) points.

School Activities (explain your participation):

1. Academic Clubs: _____

2. Athletic Activities: _____

3. Student Council: _____

4. Drum Major: _____

5. Class Officer: _____

6. Drama: _____

7. Band _____

8. Debate Team: _____

9. Yearbook Editor: _____

10. Other School Activities: _____

CHURCH ACTIVITIES

(Limited to school year 2017-2018)

All church activities must have a letter of verification for each ministry, leader, and supervisor supporting your participation.

Explain your Church activities. Include the frequency in which you participated on a monthly basis.

1. Ministry President: _____
2. Choir: _____
3. Musician: _____
4. Usher: _____
5. Devotion leader: _____
6. Nursery Helper: _____
7. Children's Church Helper: _____
8. Ministry Secretary: _____
9. Sunday Church School: _____
10. Tithes or Church Offering: _____
11. Other Church Activities: _____

COMMUNITY SERVICE ACTIVITIES

(Limited to school year 2017-2018)

All Community Service Activities must have a letter of verification for each service.

Explain your activity and include the approximate number of hours per month:

1. Tutor: _____

2. Hospital Volunteer: _____

3. Neighborhood Cleanup: _____

4. Feeding Shelter: _____

5. Library Helper: _____

6. Church Office: _____

7. Convalescent Home: _____

8. Other Community Service/Activities: _____

ESSAY PACKET

Please write an essay on the following subject: “Data continues to show that African American and other minority groups consistently lag behind in academic performance and high stakes test scores. **How can you, as an individual, help to reverse this phenomenon using the Christian concepts of evangelism, discipleship, prayer, outreach and missions?**”

GUIDELINES

1. Must be written by applicant, but may be typed by someone else.
2. Must be typed and double-spaced.
3. Minimum one (1) double-spaced page, maximum four (4) double-spaced pages.
4. Must have a cover letter/title page, which should include the following:
 - Addressed to Chairman of Scholarship Committee
 - Name
 - Address
 - Phone Number
 - Email Address
 - Current Date
5. Grading will be based on the following criteria:
 - Sentence and paragraph structure.
 - Content
 - Spelling and punctuation

COLLEGE TRANSCRIPTS

Please attach an official copy of your college transcripts. **All transcripts must be in a sealed envelope from your college or university.**

Your school transcripts will be reviewed to determine your G.P.A.

Your school transcripts will be reviewed to determine if you are eligible to be recognized as our honor roll student. (Only 3.0 G.P.A. and above will be accepted as honor roll students.)

COLLEGE AWARDS

Only current school year 2017-2018 awards will be accepted.

- Please submit a copy of award certificate.
- You will be given two (2) points for each award.
- If you submit more than five (5) awards, the maximum points awarded are ten (10).

STATEMENT REGARDING DISTRIBUTION OF SCHOLARSHIP AWARD

1. The scholarship award will be distributed in two or three equal payments. These payments will precede quarter or semester sessions. For institutions whose registration sessions do not fall under the quarters or semesters, please inform the scholarship committee.

2. The scholarship recipient should contact the Scholarship Committee Chairperson once he or she has registered. **(Do not contact the Church Office.)**

3. There are two options for disbursement.
 - a. The recipient has registered and paid in full. In case, the recipient must bring proof of payment to the Scholarship Committee Chairperson and he or she will be reimbursed. **Student must provide proof of full time enrollment.**

 - b. If the scholarship award is necessary for the recipient to register, the check will be drawn in the name of the institution and the recipient. **The check must be endorsed over to the institution. Under no circumstances is the student to receive cash. Students must submit proof of full time enrollment to the Scholarship Committee Chairperson.**

4. The scholarship award will be disbursed within two weeks after the request form has been processed by the church office.

CERTIFICATION

I, the undersigned, hereby make application to the St. Paul Baptist Church Scholarship Award and certify that:

1. All the information submitted is true and correct.
2. I will use the funds received to pay for college expenses only.
3. If there should be any interruption in my plans for continuing my education this school year (2018-2019), I will notify St. Paul Baptist Church and return the funds.
4. I have read and reviewed the **“Statement Regarding Distribution of Scholarship Award.”**

Please print and provide with original signature.

_____ *Date* _____
Applicant's Signature

_____ *Date* _____
Parent or Guardian Signature

_____ *Date* _____
Parent or guardian Signature

CHECKLIST FOR SCHOLARSHIP APPLICATION

Have you completed the following? If so, check each box as the item is done. When all boxes are checked, your application is complete. May God Bless you in your future endeavors.

____ PERSONAL INFORMATION

____ OFFICIAL TRANSCRIPTS

____ SCHOOL ACTIVITIES

____ COMMUNITY SERVICE

____ CHURCH ACTIVITIES

____ ESSAY PACKET

____ LETTERS OF VERIFICATION

St. Paul Baptist Church
Scholarship Committee
3996 14th Avenue
Sacramento, CA 95820
(916) 737-7070

LETTER OF VERIFICATION
(You may make multiple copies of this form)

Church Activities
2017 - 2018

DATE: _____

STUDENT: _____

STREET: _____

CITY: _____

STATE: _____ Zip: _____

PHONE: _____

ATTENTION: Ministry Leader, Teachers, Counselor, Advisor or Supervisor, please verify that
This student, _____, is actively participating in the
activities listed below. Please sign your name in the space provided and initial each activity for
confirmation of participation. *(Ex: Church activities; School activities; Community services)*

CHURCH ACTIVITIES

_____	_____
_____	_____
_____	_____
_____	_____

Signature _____
Ministry leader, Teacher, Counselor, Advisor, or Supervisor

Signature _____
Ministry leader, Teacher, Counselor, Advisor, or Supervisor

Signature _____
Student

Signature _____
Parent if applicable (under age 21)

St. Paul Baptist Church
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LETTER OF VERIFICATION
(You may make multiple copies of this form)

School Activities
2017-2018

DATE: _____

STUDENT: _____

STREET: _____

CITY: _____

STATE: _____ **Zip:** _____

PHONE: _____

ATTENTION: Ministry Leader, Teachers, Counselor, Advisor or Supervisor, please verify that
This student, _____, is actively participating in the
activities listed below. Please sign your name in the space provided and initial each activity for
confirmation of participation. (Example: Church activities; School activities; Community
services)

SCHOOL ACTIVITIES

_____	_____
_____	_____
_____	_____
_____	_____

Signature _____
Ministry leader, Teacher, Counselor, Advisor, or Supervisor

Signature _____
Student

Signature _____
Parent if applicable (under age 21)

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LETTER OF VERIFICATION
(You may make multiple copies of this form)

Community Activities
2017-2018

DATE: _____

STUDENT: _____

STREET: _____

CITY: _____

STATE: _____ **Zip:** _____

PHONE: _____

ATTENTION: Ministry Leader, Teachers, Counselor, Advisor or Supervisor, please verify that This student, _____, is actively participating in the activities listed below. Please sign your name in the space provided and initial each activity for confirmation of participation. *(Example: Church activities; School activities; Community services)*

COMMUNITY SERVICES

_____	_____
_____	_____
_____	_____
_____	_____

Signature _____
Ministry leader, Teacher, Counselor, Advisor, or Supervisor

Signature _____
Student

Signature _____
Parent if applicable (under age 21)