

CALVARY BAPTIST CHURCH EDUCATIONAL FUNDING APPLICATION
CONTINUING EDUCATION APPLICATION

- **ELIGIBILITY:** To qualify for funding you must (1) be experiencing a financial hardship, (2) be an **active** member of Calvary Baptist Church, (3) be matriculating in a tuition-based program of an institution of higher learning (e.g., college, university, or trade/vocational school), and (4) have a grade point average that is at least equivalent to a "C" or passing grade.
- **PROCESS:** Please complete each applicable item of the application, attach a copy of an official transcript, a tuition fee schedule or other supporting financial information, and return the completed application to the Church Office. Recipients will be notified within two weeks of submission of the application.

PERSONAL DATA

Full Name: _____
First Last Middle Initial

Permanent Residence Address:

Street City State Zip Code

Telephone Number: _____ E-Mail Address: _____

Social Security Number: _____ Date of Birth (mm/dd/yyyy): _____

Student ID Number: _____

Most Recent Alma Mater: _____
Name City State

Graduation Date: _____ GPA: _____

Completion Date of Graduation Equivalency Degree: _____

Institution of Higher Learning for which Funds are Sought: _____
Name

City State

Expected Graduation Date: _____ Current GPA: _____

Amount of Funds Requested: \$ _____

Describe the Use of Funds Requested: _____

Describe the Financial Hardship You are Experiencing: _____

Current Church Affiliation (include description of applicable church service):

AWARDS

Please list the name and amount of any grants, scholarships, financial aid, stipends and paid internships you have been awarded for the upcoming academic year.

Name of Award and/or Award Sponsor	Amount	Granted	Pending
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Please provide any additional information that is pertinent to the evaluation of your application. Include information on what you have done to meet your financial needs beyond the items included in the Awards Section above.

Signature: _____

Date: _____