

Mary Hill Davis

Ethnic/Minority Scholarship Application

7557 Rambler Road, Suite 1200 | Dallas, TX 75231-2388



ETHNIC BACKGROUND

African American Hispanic Intercultural Native American *U.S. CITIZEN YES NO

PERMANENT RESIDENT ALIEN CARD NUMBER _____ *(Please send a copy of Card with Application)
(If not a U.S. Citizen)

HOW LONG HAVE YOU BEEN A TEXAS RESIDENT? _____ YEARS _____ MONTHS

CONTACT INFORMATION

NAME _____
(first) (middle) (last)

PRESENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

DAYTIME PHONE (_____) _____ EVENING PHONE (_____) _____

CELL PHONE (_____) _____ E-MAIL _____

PERMANENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PERMANENT PHONE (_____) _____ SOCIAL SECURITY NUMBER _____ - _____ - _____ M F

BIRTH DATE _____ / _____ / _____ PLACE OF BIRTH _____
(City, State, Province, Country)

FAMILY INFORMATION

MARITAL STATUS SINGLE (NEVER MARRIED) ENGAGED* MARRIED* DIVORCED * NAME OF SPOUSE OR FIANCÉ _____

NUMBER OF CHILDREN IN IMMEDIATE FAMILY _____ (list names and ages of each below)

NAME _____ AGE _____ NAME _____ AGE _____

NAME _____ AGE _____ NAME _____ AGE _____

NAME _____ AGE _____ NAME _____ AGE _____

HIGH SCHOOL APPLICANTS ONLY

FATHER'S FULL NAME _____ ETHNIC BACKGROUND _____

MOTHER'S MAIDEN NAME _____ ETHNIC BACKGROUND _____

SCHOLARSHIP REQUEST INFORMATION

HAVE ANY OF YOUR FAMILY MEMBERS RECEIVED A SCHOLARSHIP FROM BGCT? YES NO IF YES, WHO _____

WHAT IS THE APPROXIMATE DATE YOUR SCHOLARSHIP WILL BE NEEDED? _____ SEMESTER _____ YEAR

WHAT IS THE TEXAS BAPTIST UNIVERSITY OF YOUR CHOICE? _____

HAVE YOU BEEN APPROVED FOR ADMISSION BY THE SCHOOL ABOVE? YES NO (This is necessary before the application process can be finalized)

Mary Hill Davis Ethnic/Minority Scholarship Application

EDUCATION INFORMATION

SCHOOL NAME AND CITY	ATTENDED FROM-TO	GRADUATION DATE	GPA
_____ (High school)	_____	_____	_____
_____ (College/University)	_____	_____	_____
_____ (Seminary)	_____	_____	_____
_____ (Other)	_____	_____	_____

VOCATION/FIELD OF WORK _____

CHURCH INFORMATION

NAME OF CHURCH WHERE YOU HOLD MEMBERSHIP _____

IS THIS CHURCH COOPERATIVE WITH THE BAPTIST GENERAL CONVENTION OF TEXAS (BGCT)? YES NO

CHURCH ADDRESS _____

CITY _____ STATE _____ ZIP _____

PASTOR'S NAME _____ PASTOR'S PHONE (_____) _____

NAME OF CHURCH YOU ARE PRESENTLY ATTENDING _____

IS THIS CHURCH COOPERATIVE WITH THE BAPTIST GENERAL CONVENTION OF TEXAS (BGCT)? YES NO

CHURCH ADDRESS _____

CITY _____ STATE _____ ZIP _____

PASTOR'S NAME _____ PASTOR'S PHONE (_____) _____

POSITIONS OF RESPONSIBILITY OR LEADERSHIP IN YOUR CHURCH WHERE YOU HAVE BEEN ACTIVE _____

CHRISTIAN AND BAPTIST BACKGROUND INFORMATION

WHEN DID YOU FIRST JOIN A BAPTIST CHURCH? _____

HOW DID YOU BECAME A CHRISTIAN? _____

Mary Hill Davis Ethnic/Minority Scholarship Application

DISCLOSURE STATEMENT & APPLICANT SIGNATURE

The contents of each application will be held in strictest confidence by the staff of the Baptist General Convention of Texas. Any applications that contain false or misleading information will be disqualified.

The application process will be completed only after we receive the following documents:

- A completed and signed Mary Hill Davis Scholarship Application that includes a current photograph of the applicant
- Letter of recommendation from your pastor on church stationery
- A transcript of credits from your present school or university.
- Copy of university's acceptance letter (applicable to new college students).

SIGNATURE OF APPLICANT _____ DATE _____

SCHOLARSHIP APPLICATIONS MUST BE SUBMITTED TO OUR OFFICE NO LATER THAN APRIL 15TH.

MAIL COMPLETED AND SIGNED APPLICATION WITH ABOVE MENTIONED DOCUMENTS TO:

TEXAS BAPTISTS
CULTURAL ENGAGEMENT TEAM
7557 RAMBLER ROAD, SUITE 1200
DALLAS, TX 75231-2388