

MOUNT PLEASANT BAPTIST CHURCH
6477 LINCOLNIA ROAD
ALEXANDRIA, VIRGINIA 22312
SCHOLARSHIP CAREER DEVELOPMENT MINISTRY
THE CARA GORDON DISTINGUISHED GRADUATE
NOMINATION FORM AND GUIDELINES

WHO IS ELIGIBLE

1. Be an **active** member of Mount Pleasant Baptist Church.
2. High School graduate for the year **2026**.
3. Active involvement in **community, school and church environment**.

CRITERIA FOR THE AWARD

Applicants must provide:

1. A current official transcript.
2. Two (2) letter(s) of reference that support your church involvement by a ministry leader. A family member cannot submit a reference letter. Applicants are encouraged to use MPBC Scholarship Career Development Ministry Reference Form which is available online.
3. Statement verification of a minimum of sixteen (16) hours of service to a community organization supported on official letterhead.
4. A **minimum of two letters of reference** (teachers, counselors, employers, etc.) Applicants are encouraged to use Mount Pleasant Scholarship Career Development Ministry Reference Form which is available online.
5. **Special honor documentation:** Documents submitted by person(s) of authority or distinction from educational institutions and/or community service organizations, which includes religious associations, noting a special honor, outstanding accomplishment or commendation you have been bestowed are reviewed with the higher rating.
6. **Essay.**

God is directing my life to better myself, my community, my church by...?

7. One full packet which includes the application with supporting documents to be submitted to **Scholarship@mtpleasantbc.org** by the deadline. **Incomplete applications will not be accepted.**

Deadlines: Applications must be received by **April 12, 2026**

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Special Note: An application for a scholarship or tuition assistance award must be submitted separately to be considered for those awards.

THE CARA GORDON DISTINGUISHED GRADUATE NOMINATION FORM

APPLICANT INFORMATION

Name:

Address:

City:

State:

ZIP Code:

Home No.

Cell No.

Alternative Telephone No:

Email:

Cumulative GPA:

Parent's Name (s):

EDUCATIONAL INFORMATION

Current High School:

SPECIAL HONORS (ATTACH SUPPLEMENTAL INFO TO APPLICATION)

I certify that all answers and statements on this application are true and accurate to the best of my knowledge.

I understand that should this application contain any false or misleading information, my application may be subject to disqualification.

Incomplete applications will not be accepted and all applications must be submitted by the deadline.

Signature of Applicant:

Date:

Parent's Signature if applicable:

Date:

1. The amount of the award will not exceed \$1500.00 and is awarded personally to the most distinguished high school graduate who meets the criteria.
2. **A committee from the Scholarship Ministry will review the applications and select the recipient.**