



The Judy Sanders Memorial Scholarship Fund
Caney Missionary Baptist Church
4118 Highway 128
Bismarck, Arkansas 71929



Name: _____ Date of Birth: _____

Social Security #: _____ College ID #: _____

Home Address: _____

City _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Are you a member of Caney Missionary Baptist Church? _____

Name of High School: _____

Cumulative GPA (2.5 Minimum): _____ ACT Score: _____

College Attending: _____

Intended Major: _____ Expected Graduation Year: _____

Name and Address of Parent or Guardian: _____

Father's Occupation and Employer _____

Mother's Occupation and Employer _____

How many immediate family members will be in college next year? _____

Please list any extracurricular activities and clubs you participate in _____

Please list all church activities you are involved in _____

What is the estimated expense for your school per year?_____

Please list any other scholarships or grants that you have been awarded and amounts:

Will you be living on campus or commuting?_____

List three references with phone numbers. Please include one church member and one teacher.

- 1.
- 2.
- 3.

Any additional remarks you would like the committee to consider concerning your applicaton:_____

Please make sure you also attach the 3 following items to your application or it will not be complete:

- ☐ An essay on your future plans and goals after you graduate college.
- ☐ Official copy of your high school transcript
- ☐ A copy of your college acceptance letter.