PENNIES FROM HEAVEN SCHOLARSHIP FUND

One Sixty Warren Street Roxbury, Massachusetts 02119 Willie Bodrick, II, Senior Pastor - Arthur T. Gerald, Jr., Pastor Emeritus

SCHOLARSHIP APPLICATION

IR:	ame of Applicant: ST	MIDDLE		 LAS		
	Current Address:		L/ (O			
	STREET		APT			
	CITY	STATE	TE Z			
١.	Current Telephone: Home	Cell	Work			
	EMAIL ADDRESS					
	EMAIL ADDRESS	Day	Year			
5.	In case we can't reach you, whom can we notify?					
	Name:					
	Address:					
	Telephone Home	Cell	Work			
	What high school (trade school, academy, high school equivalency program) are you currently enrolled in?					
	Name of School					
	City, State					
	Course Concentration/Major					
	When will you graduate?					
	Extra-curricular activities					
	Are you a member of Twelfth Ba	ptist Church? Yes	s No			
	ase list your participation in the follo mittees, TBC fellowship; (2) church	leadership roles	mber in TBC ministri	es, TBC		

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8.	Are your parents/guardians members of Twelfth Baptist Church?						
	Mother's Name	TBC M	lember? Yes	NO			
	Father's Name	TBC	Member? Yes_	NO			
	Guardian's Name	TBC	Member? Yes_	No			
9.	If at least one of the above is a TBC member, go on to question 11.						
10.	If neither parent nor guardia member of Twelfth Baptist	tive who is a					
	10a If yes Name	Re	elationship to yo	ou			
11.	Please list below the name, address, and contact person for the post-second education program that you <u>have been admitted to and have registered for (or plan to register for).</u>						
	Institution Name						
	City, State						
	Director of Admissions						
	His/Her Telephone number			Extension			
	Classes will begin:						
	Title of Program/Major						
	What degree (certificate, diploma, or license) do you except to earn?						
12.	Please provide a brief statement of your educational and career goals						
13.	Signature of Applicant		Da				
	DO NOT WRITE BELOW	THIS LINE: FOR COMM	IITTEE USE OI	<u>NLY</u>			
Application received		Comments:	AWD	N AWD			