



Greater White Stone Missionary Baptist Church
917 South Wellington Street
Memphis, TN 38126
Reverend Roger R. Brown, Pastor

Scholarship Application

Part 1

A. Student's Name _____
Last First Middle

Address _____
Street Address or P.O. Box Number

_____ City State Zip Code

Telephone Number _____ Social Security # _____

Age _____ Date of Birth _____

Male _____ Female _____

Date of Membership _____

Parent(s) or Guardian(s) _____

B. Name of High School _____

School Address _____

School Telephone Number _____

High School GPA _____ ACT/SAT Score _____

Principal's Name _____

Counselor's Name _____

C. Service/Academic Organizations

Please list school and church activities, leadership roles, community involvement and honors you have received. You may attach an extra sheet if needed.

I hereby acknowledge that the information given is correct and complete to the best of my knowledge.

I have presented all information requested accurately and honestly. I have read the requirements for this scholarship, and I hereby authorize release of any information in reference to this application.

_____ Signature-Student	_____ Date	_____ Signature-Parent or Guardian	_____ Date
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_____ Print-Student Name	_____ Date	_____ Print-Parent or Guardian	_____ Date
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Applications should be returned to: Scholarship Fund Committee
Greater White Stone M.B. Church
917 South Wellington Street
Memphis, Tennessee 38126

Note: If additional copies of the application are needed, please feel free to photocopy as many as needed.