First Christian Community Baptist Church 4116 Groveland Avenue Baltimore, Maryland 21215 (410) 664-7443



DEOTHA HUMPHREY MEMORIAL BOOK SCHOLARSHIP APPLICATION PACKET

Application Deadline:

Application packet must be RECEIVED by

April 18th

APPLICATION PROCEDURES

The applicant must meet the following criteria in order to be eligible for a scholarship:

- Must be a member of FCCBC in "Good Standing".
- Submitting of a 500-word essay on one (1) of the following topics:
 - 1. In honor of your heritage, please write about a famous or non-famous individual
 - or event and how it impacted the lives of individuals then and now.

or

2. Reflect on a time when you questioned or challenged a belief or idea. What

prompted your thinking? What was the outcome?

• Submit all required application materials and comply with all application requirements within the prescribed time period by April 18th. All materials must be postmarked by April 18, 2023. Incomplete applications will not be considered.

The following documents MUST accompany your completed application form:

• **Proof of enrollment or acceptance** in an accredited post-secondary educational institution (two- or four-year college/university, trade school) as a full or part time student.

• Essay. A typed essay of 500 words.

• <u>Signatures</u>. Scholarship application and any other document requiring a signature must be signed.

A completed Deotha Humphrey Memorial Scholarship Book Application form along with the two (2) items listed above MUST be submitted as one complete application package. If any items are omitted, the application package will be deemed incomplete and will not be considered. Incomplete packages will not be returned. All information provided is considered confidential and becomes the property of FCCBC.

COMPLETE, PRINT AND MAIL COMPLETED APPLICATION PACKAGE TO:

First Christian Community Baptist Church P.O. Box 67407 Baltimore, Maryland 21215

IMPORTANT APPLICATION DEADLINE INFORMATION

Application package must be RECEIVED or POSTMARKED by April 18, 2023.

For questions regarding the application process contact:

Alexis Banks, (443) 310-7710 OR Cheryl Jones-McCottry, (301)908-3487

The Deotha Humphrey Memorial Scholarship BOOK SCHOLARSHIP APPLICATION

Please type or print legibly

(Electronic copy available on FCCBC website: www.myfccbc.org)

APPLICANT INFORMATION

Name:			
	ast First	MI	
Date of Birth:			
Gender: M	aleFemale		
Home Address: _			
	Street Address/Apt. Number		
-	City/State/Zip Code		
Home Phone:			
	Area Code/Number		
Cellular Phone: _	Area Code/Number		
Email Address: _			
Are you a membe	r of First Christian Community Baptis	t Church?	
Are you a membe	i of this christian community Daptis		
	ctivities in which you participate (i.e.,	Sunday School, choir, etc.):	
		Scholarship from this organization?	
	SCHOOL INFO	RMATION	
Name of School:			
School Address:			
	Street Name/Apt. Number	City, State & Zip Code	
A. Date of gradu	ation/expected graduation:		

B. Date received GED/expect to receive GED:

C. Cumulative GPA:	
What is your current or intended major field of study?	
Do you or will you attend full time or part time:	
Indicate number of credit hours:	
Level of school status (i.e., Freshman, Sophomore etc.):	

FAMILY INFORMATION

Address:	
Street Name/Apt Number	City, State & Zip Code
Home Phone Number:	
Work Phone:	
Cell Phone:	
Email Address:	
Name of Father/Male Guardian:	
Address:	
Street Name/Apt Number	City, State & Zip Code
Home Phone Number:	
Work Phone:	
Cell Phone:	
Email Address:	

WORK/VOLUNTEER HISTORY

List any work/volunteer history (including internships). Please include the dates of employment, name of organization, position held and supervisor name/phone number. If using separate sheet, please indicate so and use the same format as below.

Organization	Position /Duties	Name of Supervisor/Phone Number

CERTIFICATION

I certify by signing below that all information submitted is accurate and correct to the best of my knowledge. I give FCCBC permission to verify any information contained in my information package, as necessary. I do understand that misrepresentation of any information or the submission of inaccurate or incomplete information will result in disqualification to be considered for a scholarship or forfeiture of any award that I may receive.

I understand that if the applicant is awarded a scholarship the funds will be made payable to the applicant once the proper acceptance form has been returned to FCCBC.

Applicant Signature

Parent/Guardian Signature

Date

Date

Application Checklist

- \Box Completed and Signed Application
- □ Proof of Enrollment or Acceptance in an accredited two- or fouryear college/university or trade school
- □ Required Transcripts
- \Box Essay (500 words)