

## Scholarship Guidelines

FIRST BAPTIST CHURCH OF CREVE COEUR REV. JAMES E. LACY MEMORIAL SCHOLARSHIP ORIGINATED IN 1992

All applicants requesting a scholarship award must be a member of First Baptist and adhere to the following guidelines:

- 1. Be a member in good standing (refer to the church by-laws)
- 2. Be a member of First Baptist Church of Creve Coeur for three years prior to applying for a scholarship.
- 3. Must be a consistent member of at least one youth activity (i.e. Sunday School, Jr. Ushers, etc.)
- 4. Submit a Scholarship application (each section must be completed.)
- 5. Present a letter as proof of acceptance from an accredited institution. This applies to first-year (Freshman Year) and transfer students only.
- 6. Present an official transcript showing a grade point average of 2.00 or better. A minimum of 2.00 must be maintained in order to receive an award each year. (The student must be in good standing with an accredited institution.
- 7. Must be enrolled full-time. Full-time is considered to be a minimum of 12 credit hours for each semester, trisemester, or quarter. Regards to all exceptions to former, please note – a minimum of 24 credit hours must have been earned for the academic year, fall through spring.
- 8. Awards are given for Graduate Studies under the following guidelines:
  - **A.** The program must be entered immediately upon completion of undergraduate studies; or, applicants must have been enrolled full-time for the academic school year preceding year for request.
  - **B.** Graduate studies must be full-time (a minimum of eighteen credit hours earned for the regular academic school year: including semester, trimester, or quarter system).
  - **C.** A minimum G.P.A. of 3.00 must be maintained in order to receive an award each year.
- **9.** All applicants and supporting documentation must be mailed to the church by the advertised deadline (official postmark required).

First Baptist Church of Creve Coeur P. O. Box 411246 331 N New Ballas Road Creve Coeur, MO 63141

**Note:** If extenuating circumstances (illness, bereavement, etc.) exist for an applicant regarding any of the above guidelines; please submit a letter of explanation to the committee for consideration of exception. It is our desire to assist all members who apply.

The scholarship award is distributed according to the availability of funds.

## FIRST BAPTIST CHURCH OF CREVE COEUR REV. JAMES E. LACY MEMORIAL SCHOLARSHIP APPLICATION

## PREDICATED UPON FULL COMPLIANCE OF RULES AND REGULATIONS (SEE ATTACHED) SCHOLARSHIPS WILL BE AWARDED AFTER APPROVAL BY THE SCHOLARSHIP COMMITTEE

| Application Information:   |                             |                       |  |
|--|-----------------------------|-----------------------|--|
| Applicant Name   |                             |                       |  |
| Home Address   |                             |                       |  |
| City   | _ State                     | Zip Code              |  |
| Home Phone   |                             |                       |  |
| Current Youth Activities   |                             |                       |  |
| Original Date of Membership  |                             | _Date of Application  |  |
| Parent or Guardian Informatior<br>Name:  | 1:                          |                       |  |
| Last   | First                       | MI                    |  |
| Home Address   |                             |                       |  |
| City   | State                       | Zip Code              |  |
| Home Phone   |                             | _ Relationship        |  |
| High School Data:  |                             |                       |  |
| School Name  | Graduati                    | on Date: Month Year _ |  |
| Address  |                             |                       |  |
| City   | State                       | Zip Code              |  |
| Phone  |                             |                       |  |
| Post-Secondary School Data:  |                             |                       |  |
| School where funds will apply  |                             |                       |  |
|  |                             | State                 |  |
| Major course of study  | Anticipated graduation date |                       |  |
| 2 years 4 year   | Vocational /Tech            | nnical Other          |  |
| (If additional space is needed for below questions. Please attach response.)       |                             |                       |  |
| Are there any extenuating circumstances? If yes, please explain. If not, state no. |                             |                       |  |
|  |                             |                       |  |
| Goals and Aspirations:   |                             |                       |  |

Signature of Applicant\_\_\_\_\_