

LADIES AIDE AUXILIARY

GUIDELINES FOR SCHOLARSHIP RECIPENTS

1. Every 2020 high school graduate who is an active member as

 defined by the Church Bylaws of New Providence Baptist Church is eligible to apply.

1. Students who wish to be considered for a scholarship should

Submit an application on or before Sunday May 15, 2020.

1. Students must be enrolled or accepted at a school of higher Learning

(proof must be provided) i.e. Wake Technical Community College, Shaw, NC State, UNC, NCCU, A & T, etc.

1. Every enrollee will receive $500.00.
2. Scholarship monies will be made payable to the student.
3. Student will keep the Scholarship Committee informed of their college progress. This may involve sharing their college experiences via letter or in person with the committee and /or church congregation.
4. Scholarships will be awarded during church service on

Sunday, June 7, 2020.

 Scholarship Committee

 LeShawn Thorpe

 Wanda Fike

New Providence Missionary Baptist Church

Ladies Aide Auxiliary Scholarship Application 2020

Character Reference Recommendation Form

Applicant Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you known him/her?

The applicant named above is applying for a scholarship from the New Providence Missionary Baptist Church. Your recommendations are a key part of the application process. The scholarship recipient will be based upon character, school and community activities, personal motivation and leadership potential.

Describe your relationship (teacher, church member, community leader employer, etc…

Please complete this form as soon as possible and return to graduate

NO LATER THAN MAY 16, 2020.

For additional information or questions, please contact the Scholarship Committee LeShawn Thorpe (919) 567-3806. Please provide your contact information below so that we may contact you for further information, if required. Thank you for assisting this student.

Name Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address City State Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NEW PROVIDENCE MISSIONARY BAPTIST CHURCH

LADIES Aide AUXILIARY SCHOLARSHIP APPLICATION 2020

Applicant Please print your answers

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| --- | --- |
| 1. Last Name | First Name |
| 2. Mailing Address:Street:City: State: Zi |
| 3. Home Telephone Number ( )Cell Phone Number ( )Email Address:\_\_ |
| 4. Name of High School Attending:School Address:High School Phone ( )Name of Principal or Guidance Counselor: |
| 5. University/ College:\*Please attach a copy of your College Acceptance Letter to this Application.What Specially/field do you hope to study while you attend college?What Careers/professions are you considering |
| 6. New Providence Missionary Baptist member: Yes\_\_\_List activities you have participated in as a member |
| 7.List academic and extra-curricular activities you have participated in at your High School:  |
| 8. References: (Please give 3- include teachers, church administrators etc) List contact Information:1. Phone Number: Email Address: 2. Phone Number: Email Address: 3. Phone Number: Email Address: |
| 10. Applicant Deadline is Sunday June 7, 2020Submit to LeShawn Thorp or Wanda FikeApplicant Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_NPMBC Administrator Verification\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |