

# Chalker W. & Kathryn Brown Memorial Scholarship

## 2020 Instructions and Information

***PLEASE READ AND FOLLOW ALL INSTRUCTIONS CAREFULLY!***

### **Eligibility:**

- The applicant is to give clear testimony to having a personal relationship with the Lord Jesus Christ.
- The applicant must be applying for scholarship aid for post-secondary education.
- The applicant must be a member in good standing of the Callahan First Baptist Church at the commencement of education supported by the Scholarship.

### **Selection:**

- The scholarship will be awarded based on financial need, academics, and character.
- Scholarships are awarded without regard to sex, race, nationality, or national origin.

### **Process:**

- The Scholarship will be annually awarded and will be administered by the Educational Scholarship Committee of the Callahan First Baptist Church.
- The scholarship may be awarded to more than one applicant.
- The award may go to a student that is seeking a ministry or non-ministry related education at a state or private college, university or seminary.
- Applicants may apply for this scholarship annually.
- The Educational Scholarship Committee of Callahan First Baptist Church will consider each applicant's grade point average (G.P.A.), financial need, personal testimony, and overall character.

### **Instructions:**

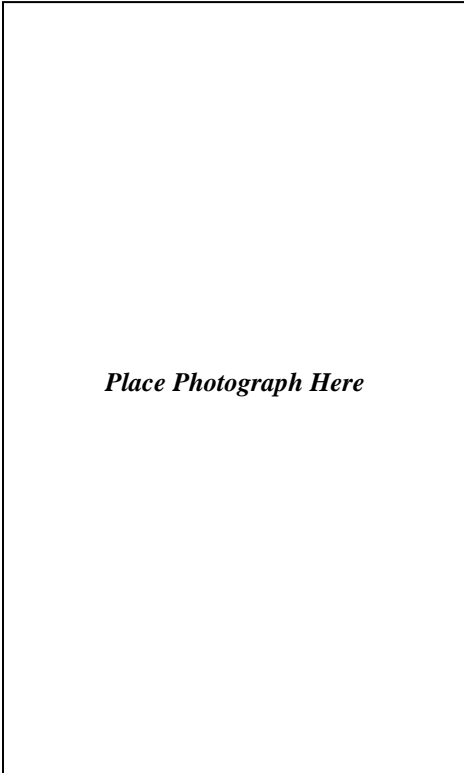
- Applications must be typed or neatly handwritten.
- Guidance Counselor<sup>1</sup> or correct college employee<sup>2</sup> **must** complete the appropriate section.
- ***All applications must be received in the church office no later than 4:30PM on Thursday, April 9, 2020.*** All incomplete applications that have not been corrected or applications received after this date will not be considered for award.
- Please follow instructions **carefully** and **completely**. ***Incomplete or incorrect applications cannot be considered.*** It is **your responsibility** to complete the application correctly. The committee has no obligation to pursue information for you during the application submission process. If questions should arise during completion of this form, contact the Correspondence Assistant (during regular business hours; 8 a.m. to 5 p.m.).
- Please include a picture of yourself with this application.

<sup>1</sup> For high school seniors, you must obtain the signature of a Guidance Counselor from your school.

<sup>2</sup> For those in post-high school institutions, you must obtain the signature of the school employee who processed your official transcript request.



## *Chalker W. & Kathryn Brown Memorial Scholarship* 2020 Application Check Off & Signature Form



- All lines of Personal Information and Educational Information form completed including “N/A” placed in all non-applicable spaces.
- A recent photograph included with this application, affixed to this page.
- All lines of Financial Information and your Personal Testimony form completed including “N/A” placed in all non-applicable spaces. Married applicants include only their total household financial information, not that of their parent(s).
- Form completed by the Guidance Counselor<sup>1</sup> or Proper College Employee<sup>2</sup> of school currently attending.
- Official Student Transcript.
- High School Class Rank\* (or explanation if unavailable).
- Turned in to church office by 4:30PM on Thursday, April 9, 2020.

\*Necessary for current high school seniors only.

Received in office by: _____ Date: _____ Time: _____
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I, the undersigned, attest that the information included within this entire application is true to the best of my knowledge.

PRINTED Name of Applicant	Signature of Applicant	Date
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*When you have completed and enclosed the following forms place a check ( ✓ ) in the appropriate box. **When you have checked all boxes, the application is ready for submittal.** Submit this checklist with all other documentation.*

<sup>1</sup> For high school seniors, you must obtain the signature of a Guidance Counselor from your school.  
<sup>2</sup> For those in post-high school institutions, you must obtain the signature of the school employee who processed your official transcript request.

# Chalker W. & Kathryn Brown Memorial Scholarship

## PERSONAL INFORMATION:

Date \_\_\_\_\_ Social Security Number \_\_\_\_\_

Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
Street City State Zip

Telephone \_\_\_\_\_  
Area Code Home Work

Date of Birth: \_\_\_\_\_ High School Graduation Date: \_\_\_\_\_

Length of residence at your current address: \_\_\_\_\_

Are you a past recipient of a Brown Scholarship Award?  Yes  No If YES, when: \_\_\_\_\_

Are you a member of Callahan First Baptist Church?  Yes  No If NO, where is your membership?: \_\_\_\_\_

If living away at school, are you active in a church?  Yes  No If YES, where: \_\_\_\_\_

## EDUCATION INFORMATION:

High School/Home School Attended: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Last School Attended: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Other Schools/Colleges Attended: \_\_\_\_\_

University or College that you plan to attend: \_\_\_\_\_

What is the anticipated cost **ANNUALLY**? \$ \_\_\_\_\_ (Tuition) \$ \_\_\_\_\_ (books)

\$ \_\_\_\_\_ (Room and Board)

*(Room and board costs are used for reference only. These costs are not a part of the Brown Scholarship award.)*

In what field(s) of study do you intend to major? \_\_\_\_\_

Please list Extracurricular Activities, Athletics, Clubs, Community Service, Offices Held, etc.

\_\_\_\_\_  
\_\_\_\_\_

Hobbies/Special Interests: \_\_\_\_\_

**This space for Educational Scholarship Committee use only:**

\_\_\_\_\_  
\_\_\_\_\_

**FINANCIAL INFORMATION:**

Father' s/Step-Father' s Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother' s/Step-Mother' s Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Guardian' s Name (if applicable): \_\_\_\_\_ Occupation: \_\_\_\_\_

Total Annual **Gross Household\*** Income: \$ \_\_\_\_\_

*\*This figure should include both parents' income even if the student does not live with both of his/her parents. If you do not know the income of a parent who does not live with you, include the income of your step-parent (or guardian) who fills their role in your home. This figure should also include child-support payments or any other form of income. If applicant is married, use YOUR household income, not that of your parents. Failure to include an amount on this line will cause the committee to disregard the application.*

Are you employed? If so, where: \_\_\_\_\_

Your Annual Income: \$ \_\_\_\_\_ . \_\_\_\_\_

Total of other scholarships you have received: \$ \_\_\_\_\_

Have you qualified or will you qualify for the Florida "Bright Futures" Scholarship?  Yes  No

If so, for what level will you qualify?  Florida Academic Scholars (FAS) (100% tuition at public institution+)

Florida Medallion Scholars (FMS) (\$159.53 per hour\*)

Academic Top Scholars Award (\$44 per hour\*)

<sup>+</sup>Additionally: \$211 per hour private and \$300 for additional expenses per semester at either

\*2019-20 rate per semester hour; other scales for quarter or clock hours

**PERSONAL TESTIMONY:** (May be continued on a separate sheet if necessary.)

I, the undersigned, attest that the above information is true to the best of my knowledge.

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

\_\_\_\_\_  
Date

**The applicant must return this form with the application. *Please make sure that your Guidance Counselor/Registrar attaches a copy of your most recent official grade report or official transcript to this sheet. Students at Florida State College Jacksonville should go to the Office of Enrollment Services to have this form completed.***

Applicant's Name \_\_\_\_\_ SS#: \_\_\_\_\_

**THIS SECTION TO BE COMPLETED BY GUIDANCE COUNSELOR<sup>1</sup> OR COLLEGE EMPLOYEE<sup>2</sup>:**

**Guidance Counselor<sup>1</sup>/College Employee<sup>2</sup>:** Please complete the following information for the above-named applicant. They are applying for the Chalker W. & Kathryn Brown Memorial Scholarship through the Callahan First Baptist Church. The applicant ***must*** return this form and an ***official student transcript*** with their application. *It is their responsibility to return this form to the church office.* Your assistance is greatly appreciated.

Applicant's Cumulative GPA: \_\_\_\_\_

SAT Score\*: \_\_\_\_\_ ACT Score\*: \_\_\_\_\_ High School Class Rank\*: \_\_\_\_\_

*\*Necessary for current high school seniors only.*

Remarks or comments concerning this applicant (if personally known): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Signature of high school Guidance Counselor or college employee processing official transcript request* \_\_\_\_\_ *Date*

\_\_\_\_\_  
*Phone number for high school Guidance Counselor or college employee processing official transcript request*

<sup>1</sup> For high school seniors, you must obtain the signature of a Guidance Counselor from your school.  
<sup>2</sup> For those in post-high school institutions, you must obtain the signature of the school employee who processed your official transcript request.

