

Guidelines for Selecting and Awarding the Bullard Family Scholarship

I. APPLICANT

1. May be either male or female
2. Must be residing in North Carolina
3. Must be a member (or parents are a member) of a church affiliated with the North Carolina Baptist State Convention
4. Must be committed to preparing for full-time Christian ministry
5. Must have been accepted for enrollment in an accredited college, university or seminary regardless of location
6. Application must be postmarked or hand delivered by or for applicant no later than **January 15** of each year to the N. C. Baptist Foundation Denominational Relations Committee for consideration for the school year beginning with the following fall semester. **Applications with missing information will be returned to the applicant for completion. The applicant may resubmit the application by the due date. Faxed applications, reference letters, transcripts or tax returns will not be accepted.**

II. SCHOLARSHIP

1. May be awarded to one or more eligible recipients at the discretion of the committee and in amounts determined solely by the committee. The committee reserves the right to make no award in any year.
2. Checks shall be issued to the school/recipient at the beginning of the term or semester for which scholarship is awarded.

Please complete the application entirely. If something does not apply to you, please enter N/A or None as a response. **PLEASE ENCLOSE ALL REQUIRED INFORMATION WITH YOUR APPLICATION: REFERENCE LETTERS, FINANCIAL STATEMENT AND TAX RETURNS. IF ALL REQUIRED INFORMATION IS NOT SUBMITTED WITH YOUR APPLICATION, IT WILL NOT BE CONSIDERED.**

PLEASE MAIL COMPLETED APPLICATION TO:

**The North Carolina Baptist Foundation, Inc.
Attn: Denominational Relations Committee
201 Convention Drive
Cary, NC 27511**

**APPLICATION
BULLARD FAMILY SCHOLARSHIP FUND**

1. Name of Applicant: _____
2. Address: _____

3. Telephone Number: _____ Area Code: _____
4. Date of Birth: _____
5. Marital Status: Married _____ Single _____ Divorced/Widowed _____
Number of dependent children: _____
6. Are you a U.S. citizen or a legal resident of the United States? Yes _____ No _____
7. Name of Father: _____ Living? _____
Address: _____
Telephone Number: _____
Occupation: _____
8. Name of Mother: _____ Living? _____
Address: _____
Telephone Number: _____
Occupation: _____
9. Name of Brother(s) and Sister(s): _____ Address _____ Age _____

10. Religious Affiliation: _____
Member of what church: _____
11. Name of school or college for which you are requesting aid and probable date of graduation:

12. Present school status (currently enrolled, in-between schools, waiting for acceptance etc.)?

13. Is student a: _____ Graduate _____ Undergraduate
14. Current grade year: _____ 15. Scholarship is for what year? _____
16. Curriculum: _____

17. How did you learn of the Bullard Family Scholarship? _____

18. If you were on the Selection Committee, why would you choose yourself for this educational scholarship? Answer this by stating in your own words and in your own handwriting your ambitions and reasons for wishing to continue your education. Please try to limit this to 100 words. Use an attached sheet if necessary.

19. What are your plans after graduation relating to full-time Christian ministry?

EDUCATIONAL HISTORY (include transcripts):

| <u>High School Attended</u> | <u>Date Attended</u> | <u>Degree Received</u> | <u>Grade Point Average</u> | <u>Class Standing</u> |
|---------------------------------|--------------------------|----------------------------|--------------------------------|---------------------------|
|---------------------------------|--------------------------|----------------------------|--------------------------------|---------------------------|

Extra-curricular activities and honors: _____

| <u>College Attended</u> | <u>Date Attended</u> | <u>Degree Received</u> | <u>Grade Point Average</u> | <u>Class Standing</u> |
|-----------------------------|--------------------------|----------------------------|--------------------------------|---------------------------|
|-----------------------------|--------------------------|----------------------------|--------------------------------|---------------------------|

Extra-curricular activities and honors: _____

OTHER BACKGROUND:

CHURCH ACTIVITIES: (List all church activities, positions of leadership and honors in connection with your church) _____

COMMUNITY & OTHER ACTIVITIES: (List all community activities of which you have been a part, positions of leadership, honors received, including Boy Scouts, Girl Scouts, Community Drives, baseball teams, YMCA, 4-H Clubs, etc.) _____



Enclose two current letters of reference from different sources.

(Sources may include but are not limited to teachers, pastors, employers, etc. Each letter must include the name, address, and telephone number of the writer. Each envelope **must be sealed** by the writer, and submitted with the application.)

PROPOSED SCHOOL YEAR BUDGET

(On the basis of a 9-month school year)

From _____, 20____ to _____, 20____
(Indicate period of time covered by budget)

ESTIMATED RECEIPTS:

From parents \$ _____
From other relatives or friends _____
Scholarships (give source) _____

Loans Expected (give source) _____

Probable vacation earnings _____
Probable earnings during the scholastic year _____
Other income or resources (specify source) _____

TOTAL ESTIMATED INCOME \$ _____

ESTIMATED EXPENDITURES:

Tuition \$ _____
Fees _____
If not living at home
Board _____
Room _____
Books and supplies _____
Other expenses (such as mortgage, car, etc.) _____

TOTAL ESTIMATED EXPENSES \$ _____

List any savings you may have: \$ _____
List any debts you owe: \$ _____

Applicant signature

**FINANCIAL STATEMENT
TO
NORTH CAROLINA BAPTIST FOUNDATION**

APPLICANT INFORMATION *Please print in ink or type.*

NAME (Last – First – Initial)

SOCIAL SECURITY NUMBER

BIRTH DATE

()

()

HOME PHONE

BUSINESS PHONE

PRESENT ADDRESS (Street)

OWN RENT

CITY – STATE – ZIP

NAME OF EMPLOYER

ADDRESS OF EMPLOYER

PHONE OF EMPLOYER

YOUR TITLE

NET GROSS

OTHER INCOME

\$

PER

\$

PER

☞ (Please attach pages 1 & 2 of your latest 1040 tax return).

\$

CHECKING ACCOUNT

Name & Address of Depository

\$

SAVINGS ACCOUNT

Name & Address of Depository

Name, address and phone of closest relative not living with you: _____

| LIST ASSETS OWNED For example: Stocks, Bonds, Jewelry, Life Insurance, IRA Accounts, Household Goods, etc. (attach additional sheet if necessary) | MARKET VALUE | PLEGGED AS COLLATERAL FOR ANOTHER LOAN | | |
|--|--------------|--|-----|----|
| Stocks | \$ | | YES | NO |
| Bonds | \$ | | YES | NO |
| | \$ | | YES | NO |
| | \$ | | YES | NO |
| | \$ | | YES | NO |

| Orig. Date | LIST ASSETS UNDER FINANCING (Attach additional sheet if necessary) | ACCOUNT NUMBER | ORIGINAL BALANCE | PRESENT BALANCE | MONTHLY PAYMENT | MARKET VALUE |
|------------|---|----------------|------------------|-----------------|-----------------|--------------|
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |

| Orig. Date | LIST JOINT ASSETS (owned or financed) (attach additional sheet if necessary) | ACCOUNT NUMBER | ORIGINAL BALANCE | PRESENT BALANCE | MONTHLY PAYMENT | MARKET VALUE |
|------------|--|----------------|------------------|-----------------|-----------------|--------------|
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |
| | | | \$ | \$ | \$ | \$ |

ARE ANY OF THE ABOVE ASSETS PLEDGED AS COLLATERAL FOR ANOTHER LOAN? YES NO

| Orig. Date | CREDITOR NAME & ADDRESS (Student loans, credit cards, gas cards, etc.) (attach additional sheet if necessary) | ACCOUNT NUMBER | ORIGINAL BALANCE | PRESENT BALANCE | MONTHLY PAYMENT | IF PAST DUE ✓ |
|------------|---|----------------|------------------|-----------------|-----------------|---------------|
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |
| | | | \$ | \$ | \$ | |

HAVE YOU LISTED ALL OF YOUR DEBTS? YES NO

| IF A "YES" ANSWER IS GIVEN TO A QUESTION BELOW, PLEASE EXPLAIN ON AN ATTACHED SHEET | YES | NO |
|---|-----------------------------|----|
| DO YOU HAVE ANY OUTSTANDING JUDGEMENTS? | | |
| HAVE YOU EVER FILED BANKRUPTCY OR HAD A DEBT ADJUSTMENT PLAN CONFIRMED? | | |
| HAVE YOU HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST SEVEN YEARS? | | |
| ARE YOU A PARTY IN A LAWSUIT? | | |
| ARE YOU OTHER THAN A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN? | | |
| IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS? | | |
| ARE YOU A COMAKER, COSIGNER OR GUARANTOR ON ANY OTHER LOAN NOT LISTED ABOVE? | | |
| FOR WHOM (Name of others obligated on loan): | TO WHOM (Name of creditor): | |

I promise that everything I have stated in this financial statement is correct to the best of my knowledge and that the foregoing information is a complete listing of all my debts and obligations. I warrant that there is no judgments against me or lien unsatisfied upon my property except as shown, nor prior suit pending against me in any court, that no assets are pledged in any manner not shown herein, and that this statement is true and complete and is offered for the purpose of obtaining credit. I authorize the Baptist Foundation to obtain credit reports in connection with this application for a student scholarship.

If there are any important changes, I will notify you in writing immediately. I also agree to notify you of any change in my name, address, employment or school within a reasonable time thereafter.

X

 APPLICANT'S SIGNATURE

 DATE

APPLICANT CHECKLIST

1. Did you include both high school and college transcripts?
2. Did you enclose two (2) current letters of reference from different sources?
3. Did you complete the financial statement?
4. Did you attach a copy of your latest 1040 tax return?
5. Did you sign and date the application?