

Social Security # \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

CONFIDENTIAL

**APPLICATION FOR RED RIVER BAPTIST ASSOCIATION  
SEMINARY SCHOLARSHIP**

For Academic Year 20\_\_ - 20\_\_

1. Name \_\_\_\_\_ Date \_\_\_\_\_

2. Address while in school \_\_\_\_\_

3. Phone # \_\_\_\_\_ Email address \_\_\_\_\_

4. Permanent address \_\_\_\_\_

5. Name of Seminary \_\_\_\_\_ Location \_\_\_\_\_

6. Are you a full-time degree candidate? ( )Yes ( )No  
If so, what degree? \_\_\_\_\_

7. Are you a member or previously been a member of an Arkansas Southern Baptist Church?  
( )Yes ( )No

If so, how long have you been a member? \_\_\_\_\_ Name of church \_\_\_\_\_  
Name of Association \_\_\_\_\_

8. Name of church where you are currently a member  
\_\_\_\_\_

9. Pastor's Name \_\_\_\_\_  
Address \_\_\_\_\_

*(Note: If you are currently serving as a pastor, use the AM/DOM for your association).*

10. Number of Dependents (if any) \_\_\_\_\_  
Relationship \_\_\_\_\_

11. List all educational institutions attended (include your current school):

INSTITUTION	LOCATION	YRS ATTENDED	G.P.A.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. List campus groups or activities in which you are active \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. List below the names and addresses of two (2) friends or relatives who normally would know your address through the next ten (10) years.

(1) \_\_\_\_\_  
Name Address

(2) \_\_\_\_\_  
Name Address

14. Are you preparing for a full-time church related vocation as a preacher, pastor or evangelist.

( )Yes ( )No If so, type of ministry: \_\_\_\_\_

Also enclose a short paragraph on the back of this page about your call to the ministry.

15. Give the following information in detail:

A. Previous awards from this scholarship fund .....\$ \_\_\_\_\_

B. Amounts now owed to:

1. Loan Funds.....\$ \_\_\_\_\_

2. Banks.....\$ \_\_\_\_\_

3. Individuals .....\$ \_\_\_\_\_

4. Other Financial Obligations .....\$ \_\_\_\_\_

Total Amount of Indebtedness .....\$ \_\_\_\_\_

16. What are the conditions of payment of obligations listed under (B) and (C) above:

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

17. Estimated Expenses for Sources of Income for

Current School Year: Current School Year

A. Tuition & School Fees \$ \_\_\_\_\_

B. Books \$ \_\_\_\_\_

C. Room & Board \$ \_\_\_\_\_

D. Clothing & Laundry \$ \_\_\_\_\_

E. Personal Incidentals \$ \_\_\_\_\_

F. Support of Others \$ \_\_\_\_\_

G. Benevolences \$ \_\_\_\_\_

H. Insurance \$ \_\_\_\_\_

I. Other \$ \_\_\_\_\_

TOTAL EXPENSES \$ \_\_\_\_\_

A. Assistance From Parents

or Friends ( ) Gifts ( )Loans \$ \_\_\_\_\_

B. Personal Funds on Hand \$ \_\_\_\_\_

C. Earnings Anticipated

During School Year \$ \_\_\_\_\_

D. Other Scholarships \$ \_\_\_\_\_

TOTAL INCOME \$ \_\_\_\_\_

18. What timeframe have you lived in Arkansas? \_\_\_\_\_ to \_\_\_\_\_

19. List below the names and addresses of two persons as references (no relatives) such as employer, counselor, teacher, church staff person, etc. Note: Please give your references the *Applicant Reference Form* to complete.

(1) \_\_\_\_\_  
Name Address

(2) \_\_\_\_\_  
Name Address

Application should be mailed to **RED RIVER BAPTIST ASSOCIATION, PO Box 396 Arkadelphia, AR 71923. (This application should be received on or before June 1<sup>st</sup>)**