

GOOD HOPE BAPTIST CHURCH

"A *God Empowered Ministry*"

RICKY E. CARTER, M.DIV., TH.D., PASTOR-TEACHER



**DATE: February, 2018**

**From: Star Five Scholarship Committee**

**To: GHBC High School Graduates**

**RE: Scholarship Application 2018**

On behalf of the Five Star Committee of the Good Hope Baptist Church, we are pleased to have you apply for the scholarship for the Fall Semester of the 2018 academic year.

The scholarship committee will award one scholarship for a student who will be attending an accredited four year college/university or a student attending a community college, vocational or technical school.

In order to apply, you **must be a member of Good Hope** who is a graduating senior from high school with a GPA of 2.5 or better.

All applications submitted must have the following documentation attached:

1. GPA verified by school counselor
2. Official transcript (Sealed)
3. Three letters of recommendation on forms provided in packet (one from high school, one from a Community Leader and one from GHBC ministry leader)

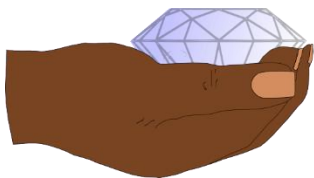
Upon receipt of your completed application, you will be notified with further instructions.

**All applications must be completed and submitted by Friday, May 4, 2018.** Please return your completed packet to Sis. Paulette Green in the Church Office. If you have any questions regarding the application process please contact Bro. Chip Jackson at 337.371.8918.

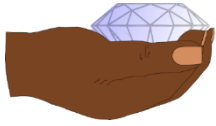
Sincerely,

*Five Star Scholarship Committee*

A"C"J:pmg



1501 E. Willow St. • Lafayette, LA 70501-3839  
Office: 337.232.3090 or 337.232.3252 • Fax: 337.232.5456 or 337.232.4335  
[church@goodhopebc.net](mailto:church@goodhopebc.net) • [www.goodhopebc.net](http://www.goodhopebc.net)



**GOOD HOPE BAPTIST CHURCH  
2017 SCHOLARSHIP APPLICATION**

**COMPLETE AND RETURN BY FRIDAY, MAY 4, 2018**

**APPLICANT**

**NAME** \_\_\_\_\_

**MAILING ADDRESS** \_\_\_\_\_

Street, Apt #, PO Box

\_\_\_\_\_

City

State

Zip Code

**TELEPHONE** ( \_\_\_\_\_ ) \_\_\_\_\_

**MOTHER'S NAME** \_\_\_\_\_

**FATHER'S NAME** \_\_\_\_\_

**HIGH SCHOOL** \_\_\_\_\_ **GPA** \_\_\_\_\_

**INTENDED PLACE OF STUDY** \_\_\_\_\_

College, university, technical school, etc.

**SCHOOL ORGANIZATIONAL INVOLVEMENT** (academic, social, sports) Attach additional sheet of paper if needed

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

**CHURCH INVOLVEMENT** (check all that apply)

- \_\_\_\_\_ Joshua Generation (Youth Ministry)  
\_\_\_\_\_ Children & Youth Choir  
\_\_\_\_\_ Mass Choir  
\_\_\_\_\_ Tuesday Bible Study & Prayer Meeting  
\_\_\_\_\_ Empowerment Hour  
\_\_\_\_\_ Vacation Bible School  
\_\_\_\_\_ Other (special committee(s) identify below

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

## LETTER OF REFERENCE

### GOOD HOPE BAPTIST CHURCH SCHOLARSHIP

APPLICANT (please print)

NAME \_\_\_\_\_ DUE DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**INSTRUCTIONS:** This letter of reference form is to be completed by a person whose relationship to the applicant meets one of the criteria below, who has known the applicant at least one (1) year and can attest to the applicant's character, leadership and service.

**RELATIONSHIP TO APPLICANT** (check all that apply)

- \_\_\_\_\_ High school teacher, counselor, or administrator
- \_\_\_\_\_ Community Leader
- \_\_\_\_\_ GHBC Ministry leader/Empowerment Hour/VBS teacher

**Please check all statements that apply to this Applicant on the basis of your own experiences. If you do not have an answer, mark "NA"**

|                                       | Strongly agree | Agree | Disagree | Strongly disagree | <b>NA</b> |
|---------------------------------------|----------------|-------|----------|-------------------|-----------|
| Obeys all school policies             |                |       |          |                   |           |
| Polite, kind, honest, fair            |                |       |          |                   |           |
| Involved in school community          |                |       |          |                   |           |
| Respect others and those in authority |                |       |          |                   |           |
| Works well in a team environment      |                |       |          |                   |           |
| Carries oneself in a Christian manner |                |       |          |                   |           |
| Involved in church community          |                |       |          |                   |           |

**PLEASE CONTINUE**

**PERSONAL STATEMENT:** Please give a brief statement attesting to the Applicant's character, leadership and service. Your statement is limited to the space provided.

Do not submit additional letters or other documents. These will not be reviewed by the Scholarship Committee of Good Hope Baptist Church.

**PLEASE TYPE OR PRINT**

**By signing this form, I verify that all of the information I have provided, including, but not limited to, my signature, is true and correct.**

\_\_\_\_\_  
Signature and Title

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone (      )

# LETTER OF REFERENCE

## GOOD HOPE BAPTIST CHURCH SCHOLARSHIP

APPLICANT (please print)

NAME \_\_\_\_\_ DUE DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

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Signature and Title

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone (      )

# LETTER OF REFERENCE

## GOOD HOPE BAPTIST CHURCH SCHOLARSHIP

APPLICANT (please print)

NAME \_\_\_\_\_ DUE DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

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Address

\_\_\_\_\_  
Phone (      )



**GOOD HOPE BAPTIST CHURCH**

*"A God Empowered Ministry"*

**RICKY E. CARTER, M.DIV., TH.D., PASTOR-TEACHER**



**GRADUATE INFORMATION FORM 2018**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone/contact information \_\_\_\_\_

Parents/Guardian \_\_\_\_\_

Educational Institution (school, college/university, training, etc) \_\_\_\_\_

College/University Graduates: Degree/Area of Concentration \_\_\_\_\_

High School Graduates: GPA \_\_\_\_\_ ACT Score \_\_\_\_\_

Church Involvement \_\_\_\_\_

School/Other Activities \_\_\_\_\_

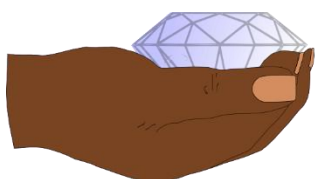
Hobbies \_\_\_\_\_

Favorite Scripture \_\_\_\_\_

Future Plans \_\_\_\_\_

- Only members of Good Hope Baptist Church are eligible to participate
- Your date of graduation must fall between July 2017 and June 2018
- Attach additional sheets if you need more space

**RETURN COMPLETE BY MAY 4, 2018 TO THE CHURCH OFFICE**



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