

GOOD HOPE BAPTIST CHURCH

"A **G**od **E**mpowered **M**inistry"

DR. RICKY E. CARTER, PASTOR-TEACHER



DATE: April 2023

From: Five Star Scholarship Committee

To: GHBC High School Graduates

RE: Scholarship Application 2023

Greetings,

On behalf of the Five Star Scholarship Committee of the Good Hope Baptist Church, congratulations on your upcoming high school graduation. We invite you to apply for the Five Star Scholarship.

The scholarship committee will award one scholarship to a student who will be attending an accredited four-year college/university or a student attending a community/technical college.

**The application packet is enclosed.**

In order to apply, you **must be a member of Good Hope** who is a graduating senior with a GPA of 2.5 or better. In addition, all applications must have the following documentation:

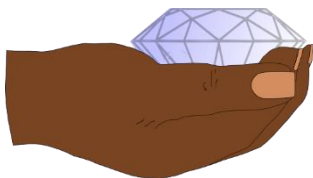
1. GPA and ACT verified by school counselor
2. Official transcript (Sealed)
3. Three letters of recommendation on forms provided in packet (one from your high school, one from a community leader and one from a GHBC ministry leader)

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

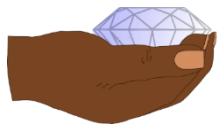
**All applications must be completed and submitted by Thursday, May 4, 2023 no later than 12 noon.** Please return your completed packet to Sister Paulette Green in the Pastor's Suite or by email to [paulettegre1012@gmail.com](mailto:paulettegre1012@gmail.com). If you have any questions regarding the application process, please contact Bro. Chip Jackson at 337.371.8918 or [chipj@louisiana.edu](mailto:chipj@louisiana.edu)

Sincerely,

*Five Star Scholarship Committee*



1501 E. Willow St. • Lafayette, LA 70501-3839  
Office: 337.232.3090 or 337.484-1526 • 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**  
**2023 SCHOLARSHIP APPLICATION**

**COMPLETE AND RETURN BY THURSDAY, MAY 4, 2023**

**APPLICANT**

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

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

Street, Apt #, PO Box

City

State

Zip Code

**TELEPHONE** (       ) \_\_\_\_\_

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

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

**HIGH SCHOOL** \_\_\_\_\_ **GPA** \_\_\_\_\_ **ACT (COMPOSITE SCORE)** \_\_\_\_\_

**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	NA
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 (      )

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### GOOD HOPE BAPTIST CHURCH SCHOLARSHIP

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Print name

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Date

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Address

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Phone (      )

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### GOOD HOPE BAPTIST CHURCH SCHOLARSHIP

APPLICANT (please print)

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone (      )



**PLEASE PRINT LEGIBLY**

<b>NAME:</b>	<b>EMAIL:</b>
<b>TELEPHONE:</b>	<b>DATE SUBMITTED:</b>
<b>LOCATION OF VOLUNTEER ACTIVITY:</b>	<b>LOCATION TELEPHONE:</b>
<b>SUPERVISOR:</b>	<b>TELEPHONE</b>

SERVICE TIME INFORMATION		TYPE OF SERVICE	
BEGINNING DATE:			
ENDING DATE:			
TOTAL HOURS:			

## LOG-IN SHEET

## TO BE USED FOR ALL VOLUNTEER ACTIVITIES

DATE	HOURS	DATE	HOURS
		TOTAL HOURS	

## SIGNATURES

<b>SUPERVISOR:</b>	<b>DATE:</b>
<b>VOLUNTEER:</b>	<b>DATE:</b>

