First Baptist Church of Tahoka
Request for Continued Scholarship Support**

Date_____

Student's Name_____
Last First Middle

College Address_____

_____

Permanent Mailing Address_____

_____

Phone_____ Social Security Number_____

Parent's Name_____

High School Graduated From_____ Year_____

Current Classification: Freshman_____ Sophomore_____ Junior_____ Senior_____

Masters_____ PhD_____

College Major_____ Current Degree Sought_____

Anticipated Graduation Date_____

List all educational institutions beyond high school you have attended:

School	Credit Hours	Degree Received

Do you plan to work during the semester?_____ If yes, hours per week?_____

How many credit hours do you plan to take during the upcoming fall and spring semesters?
Fall_____ Spring_____

Have you received, or expect to receive, any scholarships or grants for the upcoming fall/spring semesters? Fall_____ Spring_____

Scholarship or Grant	Amount

What are your plans following college graduation?

On back of form, briefly describe your spiritual journey and relationship to God since college enrollment.

**Requirements for Continued Scholarship support: minimum overall GPA of 2.5, enrolled in a minimum of 12 semester hours

ATTACH CURRENT SEMESTER HOURS AND GRADE POINT REPORT and mail to:
Scholarship Committee, PO Box 1547, Tahoka, TX 79373