

Little Rock Baptist Church
Wilford O. Noel Scholarship Memorial Fund
Scholarship Program
GUIDELINES

Vision Statement

The purpose of the Wilford O. Noel Scholarship Memorial Fund is to aid Little Rock Baptist Church students in pursuing a higher education.

Requirements

1. Scholarship money shall be awarded from The Wilford O. Noel, Sr. Scholarship Memorial Fund to active members attending either Sunday School and/or Bible Study on a regular basis.
2. Each individual seeking a scholarship must submit a personal statement of “Why you should receive this scholarship” along with a completed application. (**Submitted to the Scholarship Committee ONLY!**)
3. Each application shall be evaluated on its own merits at the time of the application review. The Scholarship Committee in consultation with the Pastor reserves the right to waive scholarship guidelines in hardship cases.
4. A Scholarship File shall be established in the Church Secretary or Financial Secretary office. The Scholarship Committee working with the Church Financial Secretary or Church Secretary shall update and maintain this file. Applications will also be available in this file.

Amounts Awarded

The Scholarship Committee may award as many scholarships as is deemed appropriate in a church year and as funds permit. Scholarships will be awarded in the following manner:

- \$1,000 Scholarship to College Pursuant
(**Must already be accepted at 2 or 4 year College or Vocational School**)
- \$100 Gift Card to High School Graduates
- \$300 Gift Card to College Graduates

Scholarship Committee

The Scholarship Committee will consist of a president and three other members. The officers are as follows:

- **President:** Barbara Reeves
- **Vice President:** Candace Thompson
- **Secretary:** Tonnetta Brown
- **Treasurer:** Blonnie Walton

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SCHOLARSHIP APPLICATION

Fill out and return to the Scholarship Committee President
Applicant will be contacted and interviewed by Scholarship Committee

Applicant's Full Name _____

Address _____

City _____ **State** _____ **Zip Code** _____

Phone _____ **Date of Birth** _____

E-Mail Address _____

Parents' Names _____

When did you become a member of Little Rock Baptist Church? _____

High school you graduated from _____

When did you graduate? _____ **Did you get a GED?** _____

Institution of higher education you plan to attend _____

What is your intended major? _____

When do you plan to attend? _____ **Anticipated completion** _____

Signature _____ **Date** _____

For Scholarship Committee Use Only

_____ **Approved** **High School or College Gift** _____
_____ **Disapproved** **Scholarship Amount** _____

Signature _____ **Date** _____