Seminary Scholarship Application Joseph M. & Ethyl B. Cox Scholarship Fund Alan D. and Glynn D. Peacock Scholarship Fund First Baptist Church Bryan, Texas

Deadline March 1 (Applications after this date won't be considered)

Name of Applicant (as	registered at school):			
Address				
City		State	Zip	
Student ID Number		Date of Birth		
Cell Phone Number _				
Email Address				
Dates of membership of	of First Baptist Church, B	ryan// to	// (Check if c	urrent member)
Marital Status:	Single Married _	Widowed Divorce	ed	
College Graduation Da	ite	College		
	Please att	ach a copy of your college t	transcript.	
Name of Seminary you	plan to attend			
Perminant Address (if o	different than above):			
City		State		_Zip
Anticipated Area of Stu	ıdy			
Anticipated cost for nex	xt Year: (Check if these a	mounts are for only one sem	ester)	
Tuition \$	Fees \$	Books \$	Room & Board \$	
What assistance do yo	u need in order to attend	seminary?		
	If you should receive	ucation (include assistance fro additional assistance after to		• •
Sourc	e			Amount

Are you currently employed or plan to be employed while in seminary? Ye	es No
If so, where?	Monthly Salary
If married, will your spouse be employed while you are in the seminary? Y	/es No
If so, where?	Monthly Salary

What area of ministry do you believe you are being called to serve? How has the Lord confirmed that in your life

Write a brief paragraph explaining your ministry goals

Why have you chosen the seminary in which you will be studying

Please share how your experiences at First Baptist Church have shaped you for ministry