



# 2011-12 Gladys York Memorial Scholarship Application

## I. Student Information

\_\_\_\_\_  
Last First Middle Student ID or Social Security

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Major(s) GPA (minimum 2.0 required)

What year will you be in college?  Freshman  Sophomore  Junior  Senior

Anticipated Number of Credit Hours \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ Spring

Are you a member and/or active attendee of the Calvary Baptist Church in Parkertown, New Jersey?  Yes  No

## II. Statement of Agreement

*I understand that if I am chosen as a recipient of the **Gladys York Memorial Scholarship**, I am required to write a paper during the spring semester of the academic year in which the scholarship is received. The paper must give an account of what I have accomplished in terms of my established goals in the categories below. I further understand that I must remain in good academic standing in order to continue to receive the **Gladys York Memorial Scholarship**. I understand that the scholarship is awarded based on demonstrated financial need, and I must file the Federal Application for Federal Student Aid (FAFSA) to qualify. Enclosed is a copy of my pastor's recommendation.*

\_\_\_\_\_  
Signature Date

## III. Essay Questions

1. What are your spiritual goals for the coming year?

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

2. What are your academic goals for the coming year?

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

3. What are your long-term career and professional goals?

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

## IV. Submission of Form

Mail completed form to: Financial Aid  
251 N. Main Street  
Cedarville, OH 45314

Or fax completed form to: 937-766-7639

*NOTE: Students from southern New Jersey who are not members of Calvary Baptist Church may be eligible for the scholarship if there are no eligible members from Calvary Baptist Church.*