

Mount Calvary Baptist Church



Scholarship Assistance Program For New Students



MOUNT CALVARY BAPTIST CHURCH
221 Emmett Drive Alexandria,
VA 22307
Reverend Frank R. Kelly, Sr.
(703) 768-7917 www.mountcalvarybaptist.com

MCBC Scholarship Eligibility and Procedures

Please read carefully.

CRITERIA:

1. **Must be a High School Graduate.**

YOU MUST SUBMIT THE FOLLOWING DOCUMENTS WITH YOUR APPLICATION:

2. **Acceptance letter** from an accredited College/University or Trade School.
3. **Must have two written references:** at least one must be from a School Official (Principal, Teacher, and Guidance Counselor), Church Official (Pastor, President of various Church Ministries) or Employer. References must be current and from someone that knows you well on a personal basis with their signature.
4. **ESSAY - (Not handwritten, at least one page) Choose a Topic:**
 - a. Discuss a current event, social issue or personal issue that is important to you.
 - b. Discuss a challenge that you have overcome and what you learned from the experience.
5. **If items 2, 3, and 4 are not included with your package you will not be considered for the Scholarship program.**
6. **Applicants must email completed Scholarship Application Form with supporting documents to: mcbcscholarship@aol.com on or before the 4th Sunday in June of each year.**

Things to Note:

1. **Application packages received after the deadline will not be accepted.**
2. **Incomplete applications package will be denied.**
3. **The Committee will review the application package and notify you of the results.**

MOUNT CALVARY BAPTIST CHURCH SCHOLARSHIP ASSISTANCE PROGRAM
MT. CALVARY BAPTIST CHURCH
2221 EMMETT DRIVE
ALEXANDRIA, VIRGINIA 22307
(703) 768-7917

PERSONAL INFORMATION

NAME: _____ DATE _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE# HOME or CELL _____ DATE OF BIRTH _____

EMAIL: _____

HIGH SCHOOL DETAILS

HIGH SCHOOL ATTENDED OR ATTENDING _____

ACADEMIC HONORS

EXTRA-CURRICULAR ACTIVITIES

SCHOOL _____

COMMUNITY _____

OTHER _____

WORK EXPERIENCE _____

ACCREDITED COLLEGE/UNIVERSITY OR TRADE SCHOOL PLANNING TO ATTEND:

CAREER PLANS

PLEASE OUTLINE YOUR FUTURE CAREER PLANS

SIGNATURE: _____ **DATE:** _____