

# THE EDNA SNEATH HORNOR SCHOLARSHIP APPLICATION

(Scholarship Managed by the Royal Palm Baptist Association)

Who is Eligible for this scholarship? Students must be a member of a cooperating church who is a member of the Royal Palm Baptist Association. They must be enrolled in /accepted to a four year Program or pursuing a Bachelor's or Master's Degree. They shall be maintaining a grade point average of 3.5 or higher.

## INSTRUCTIONS:

- Applications must be typed or completed in blue or black ink.
- To be considered for this scholarship, you must submit a scholarship application in person or it must be postmarked by **October 1, 2024** for consideration.
- A copy of your acceptance letter to the school of your choosing must accompany your application for you to be considered for this scholarship.
- You **MUST** include with your application: a letter explaining your educational plans and career goals and why you wish to be considered for this scholarship, the Church & Pastor recommendation form, and two personal recommendations (on the supplied forms).
- The scholarship application must be mailed to the address located on the last page of this form.
- Upon notification of your receipt of a scholarship the student will be **required** to submit a written thank you letter for the scholarship. Scholarship funds will not be issued until a thank you letter is received.
- Please direct any questions to the Royal Palm Baptist Association office at (239) 433-2292

## PERSONAL DATA

Name: \_\_\_\_\_  
Last First MI

Social Security Number: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_  
Street Address City State Zip

Address While In School: \_\_\_\_\_  
Street Address City State Zip

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex:  Male  Female

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

### Citizenship Status:

- U.S. Citizen
- Eligible Non-Citizen #A \_\_\_\_\_
- Foreign Student

### Marital Status:

- Single
- Married

Church Membership: \_\_\_\_\_ Date Joined: \_\_\_\_/\_\_\_\_/\_\_\_\_

## STUDENT'S EDUCATIONAL DATA

Have you graduated from High School or received a GED?  Yes  No

If yes, give \_\_\_\_\_  
Name of High School City State

Date of high school graduation: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Year

ACT Score \_\_\_\_\_ SAT Score \_\_\_\_\_ H.S. GPA \_\_\_\_\_

Name(s) of all college(s) attended \_\_\_\_\_

Have you previously earned a bachelor's degree?  Yes  No

Current College Level:  Freshman  Sophomore  Junior  Senior

Current Cumulative GPA: \_\_\_\_\_

**EDUCATION OBJECTIVES**

Name of School enrolled in/accepted to: \_\_\_\_\_

\_\_\_\_\_  
Mailing Address City State Zip

Name of a Contact Person: \_\_\_\_\_

Date which you enrolled in/began classes: \_\_\_\_\_

Degree you expect to earn (Ex. Bachelor's): \_\_\_\_\_

**SUPPORTING INFORMATION**

Please attach a letter explaining your educational plans, career goals, and why you would like to be considered for this scholarship. The length of this statement is not specified; it should be comprehensive.

Please staple this letter along with your Church & Pastor recommendation form and the two personal recommendation forms to this application.

**AWARD AGREEMENT**

In the event I am awarded this scholarship, I understand that this scholarship is to be used for institutional expenses at the institution to which I have been accepted and are enrolled. Institutional expenses are defined as tuition, lab fees, and on-campus room and board. I also understand the scholarship funds will be paid directly to the institution.

**RELEASE STATEMENT**

If you wish to be considered for this scholarship – You must give permission for the staff at Royal Palm Baptist Association and the Scholarship Committee Members of the Royal Palm Baptist Association to have access to your personal and confidential information. Also, they must have your permission for news and public relations releases. The release statement reads as follows:

I hereby authorize the Royal Palm Baptist Association to have access to the information contained in my scholarship application in connection with my eligibility for receipt of a scholarship. Also, I give them permission to release directory information for news and public relations bulletins, should I receive a scholarship. \_\_\_\_\_ (initial)

**CERTIFICATION**

By signing this certification statement I, certify that all information on this application is complete and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return completed application to:**

Scholarship Application  
Royal Palm Baptist Association  
5481 Briarcliff Road  
Fort Myers FL 33912

## PERSONAL RECOMMENDATION FOR SCHOLARSHIP

Applicant's name \_\_\_\_\_

Recommender's name \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Employer/Job Title \_\_\_\_\_

How do you know and how long have you known the Applicant? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has the applicant discussed his/her educational goals with you? Yes No Occasionally

*Please evaluate the applicant in the following areas by marking 5 for Outstanding, 4 for Above Average, 3 for Average, 2 for Below Average, 1 for Poor, or N for No Information. Please make comments on the back of this sheet for any Below Average or Poor responses. Feel free to use that space for any other comments as well.*

	Outstanding	Above Average	Average	Below Average	Poor	No Information
Character	5	4	3	2	1	N
Judgment	5	4	3	2	1	N
Emotional stability	5	4	3	2	1	N
Maturity	5	4	3	2	1	N
Commitment to Christian service	5	4	3	2	1	N
Potential for effectiveness in Christian service	5	4	3	2	1	N
Academic ability	5	4	3	2	1	N
Scholastic achievement	5	4	3	2	1	N
Skill in relating to others	5	4	3	2	1	N
Financial responsibility	5	4	3	2	1	N

Do you know of any reason that the applicant may be hindered in effective service?

Yes  No (If yes, please elaborate on the back of this sheet.)

Would you recommend this person for a position upon completion of college training?

Yes No

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I recommend this person for a scholarship, check one:

With enthusiasm With confidence With some reservations With reluctance

Recommender's Signature \_\_\_\_\_ Date \_\_\_\_\_

**PERSONAL RECOMMENDATION FOR SCHOLARSHIP**

Applicant's name \_\_\_\_\_

Recommender's name \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address \_\_\_\_\_

Street City State Zip

Employer/Job Title \_\_\_\_\_

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Yes No

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I recommend this person for a scholarship, check one:

With enthusiasm With confidence With some reservations With reluctance

Recommender's Signature \_\_\_\_\_ Date \_\_\_\_\_

## CHURCH AND PASTOR RECOMMENDATION FOR SCHOLARSHIP

Applicant's name \_\_\_\_\_

Church name \_\_\_\_\_

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

Phone: \_\_\_\_\_

### CHURCH RECOMMENDATION

Having evidenced that \_\_\_\_\_, an applicant for a scholarship from the Edna Sneath Hornor Scholarship Fund is:

- . an individual of moral integrity exemplified in personal, family, and public life;
- . an individual of commitment to the Christian faith as evidenced by participation in the life of this church;
- . an individual of emotional stability who is responsible in church life; and,
- . an individual whom this church would recommend for a responsible role of service.

We express our approval of the applicant's desire to further his/her education, recommend the candidate for this scholarship and pledge our continuing interest and prayerful support.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title/Position

### PASTOR RECOMMENDATION

Pastor's name \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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Yes  No *(If yes, please elaborate on the back of this sheet.)*

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Yes  No

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

I recommend this person for a scholarship, check one:

- With enthusiasm  With confidence  With some reservations  With reluctance

Pastor's Signature \_\_\_\_\_ Date \_\_\_\_\_