

Baptist Ministers' Conference of Boston & Vicinity, Inc. (BMC)

Academic Advancement Application 2019

Application Postmark/Email Deadline

March 15, 2019

Supporting the community through educational development and Gospel advancement

The Social and Political Action Committee "shall investigate and provide information and a plan of action as to issues affecting the interests of the parishioners and community. Such issues shall include crime, drug and alcohol abuse, illiteracy, and such issues as the President and Body deem appropriate. The Social and Political Action Committee shall provide information and a plan of action for making the church a central place of political and social action in our community."

Reverend Dr. Larry Green, Sr. President

Scholarship Committee

Reverend Ruthanne Phyllis Bracey-Darby Minister Dr. Gloria Coulter Reverend Edward Hardy Minister Catrice Williams

ELIGIBILITY REQUIREMENTS:

To be eligible for a scholarship, you must:

- Be a continuing student in a post-secondary educational institution i.e. college, music school, art school, medical training, biblical institute
- Have a letter of acceptance from the college, or other post-secondary educational institution i.e. music school, art school, medical training, biblical institute
- Be able to verify service as a servant of the Gospel (for biblical institute applicants only)
- Have an official transcript with a GPA of 2.5 or higher (a lower GPA must provide supportive documentation of leadership skills, church involvement or special circumstances; potentially wavered by the Scholarship Committee).
- Be a member in good standing in a Church that is part of the Baptist Ministers' Conference of Boston & Vicinity, Inc.

SELECTION CRITERIA:

Evaluation of the applicant is based upon the following criteria:

- Official Transcript
- Church involvement,
- Community involvement
- Compelling essay responses with correct grammar, punctuation and spelling; musical or other artistic performance or portfolio
- Letters of Recommendation (3) from:

Pastor and/or other official (required)

Teacher

Guidance Counselor

COMPLETED APPLICATION SHOULD INCLUDE:

- Application
- Essay, performance description, portfolio description
- Statement concerning how the scholarship award will be used (books, tuition, housing)
- Three letters of recommendation
- Official Transcript inclusive of grades 9-12 (potentially wavered by the Scholarship Committee for biblical institute applicants)
- Official written verification of service as a servant of the Gospel (applicable for biblical institute applicants only)
- Official transcript from post-secondary institution for post-secondary applicants

SUBMIT APPLICATION PACKAGE TO:

Email address: bmcscholarship1998@gmail.com

Or mail to:

Minister Dr. Gloria Coulter 20 Emerton Ave. Randolph, MA 02368

Recipient(s) will be notified by letter no later than mid-May 2019

COMMUNITY SERVICE/VOLUNTEER ACTIVITIES

List service activities in which you have participated as a volunteer since beginning with the most recent.

Activity/Organization (Avoid abbreviating)	Your role/position(s) held	Dates	#Hours per week
ESSAY (250-500 WORL	<u>DS)</u>		
Topic: How will this scho	plarship help you contribute to the	he commu	nity?
ARTISTIC PERFORMA	ANCE/PORTFOLIO DESCR	<u>IPTION</u>	
[completed by applicant]			

Required Certification and Release (applicant must read and sign below to be eligible)

•	Number of parent(s) dependents currently in college and/or othe educational institutions (include yourself)	er post-secondary
•	Will you be working during the summer? If hours?	yes, how many
•	I certify that all information on this application is true and complete knowledge.	to the best of my
•	I certify that I meet all the eligibility requirements as specified in the accompanying instructions.	is application and
•	By submitting this application, I understand that if I should receive will be ineligible to apply again. All materials submitted as part application become the property of the Baptist Ministers' Confere Vicinity, Inc.	of the scholarship
•	I understand that the Scholarship will be payable to the recipient up registration of classes for the 2 nd semester.	oon verification of
•	I further understand that should I be selected as a recipient of said so name and picture is subject to be published for public relation publicity.	-
•	I hereby authorize the Baptist Ministers' Conference of Boston & utilize information from my application and my picture for public and publicity.	•
Αŗ	oplicant's Signature	_ Date
	stor's Signature	_ Date
	d/or nurch Official Signature	_ Date
Ch	nurch Official Title	

LETTER OF RECOMMENDATION

Name of Applicant:
Instructions to Applicant: This Letter of Recommendation must be from a Pastor or an Official. This letter cannobe from a relative unless he/she is your Pastor. You should inform your recommender about the scholarship and your reasons for applying for it. Please give you recommender at least three weeks to write the letter. Submit the recommendation in a sealed envelope along with your application by the March 15, 2019 postmark or email deadline.
Instructions to Recommender: The person named above is applying for the Baptist Ministers' Conference of Boston & Vicinity, Inc. Scholarship. Please type, double spaced and no more than 150 words, you recommendation on the letterhead of your professional affiliation. We request you candid evaluation relative to the following:
 Academic record Academic plans and career goals Personal strengths, including motivation, leadership and commitment Community service, church activities/commitments and extracurricular activities
Since you know the candidate, the scholarship review committee is depending upon you specific and illustrative evaluation rather than a general assessment.
Please complete the information below and return this form and your signed and sealed letter of recommendation to the candidate with your signature written across the seal. All application materials must be submitted by the student by March 15, 2019 postmark of email deadline.
Thank you in advance for your assistance. For further information about the scholarship please contact Min. Dr. Gloria Coulter at (781) 986-6074 or gloriacoulter@comcast.net.
Recommender's signature
(Please print or type following information)
Recommenders' name
Professional Title
Affiliation
City State Zip Code

Telephone (_____) _____ Email _____