## Dr. Marshall and Kim Hollis Family First Baptist Church Ripley Scholarship APPLICATION

NAME			GENDER
HOME ADDRESS		PHONE NUMB	BER
CITYS	TATE	ZIP	
HIGH SCHOOL ATTENDED			
PARENTS' OR GUARDIANS' NAMES			
FATHER'S OCCUPATION			
MOTHER'S OCCUPATION			
NUMBER OF CHILDREN LIVING AT	HOME		
NUMBER OF CHILDREN IN COLLEGI	Ξ		
IS OUTSIDE FINANCIAL ASSISTANC	E NECESSA	ARY TO BEGIN A	ND COMPLETE A
FOUR-YEAR EDUCATION? YES	] NO [		
IF YES, PLEASE EXPLAIN WHY _			
DO YOU PLAN TO BE A FULL-TIM YOUR FUTURE PLANS, AS THEY REI FIELD:	LATE TO Y	OUR INTEREST I	
GIVE NAMES OF COLLEGES TO V	ИНІСН ҮО	U HAVE APPLII	ED
HIGH SCHOOL GRADE POINT AV	ERAGE _	ACT S	CORE
CLASS RANKSAT SCORE*_			
*IF AVAILABLE			

## Dr. Marshall and Kím Hollís Famíly Fírst Baptíst Church Rípley Scholarshíp

LIST ALL EXTRA CURRICULAR ACTIVITIES DURING YOUR HIGH SCHOOL CAREER, BOTH IN SCHOOL AND OUTSIDE OF SCHOOL. (Attach a separate sheet if necessary)

Activity	Date	S
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LIST PARTICIPATION IN ALL CHURCH ACTIVITES DURING YOUR HIGH SCHOOL CAREER. (Attach a separate sheet if necessary)

Activity	Dates

To be eligible for the scholarship, a student must:

- 1. Be an active member of First Baptist Church Ripley youth for at least 3 years
- 2. Have a minimum GPA of 3.0.
- 3. Have a minimum ACT score of 18.

The winner of this scholarship will receive a one time award paid directly to a college or university.

**DUE DATE MARCH 8, 2024**