

Date: \_\_\_\_\_

## Student Ministry Scholarship Application

Parent Name \_\_\_\_\_ Student's Name \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

List all others in home:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. What type of assistance are you requesting of us? Please be specific.
2. Are you a member of Hebron Baptist Church? \_\_\_\_\_  
If not, how were you referred to us? What is their phone number?
3. Are you receiving any aid (financial or other) from a government agency (unemployment insurance, worker's compensation, etc.)?
4. Have you been employed locally?  
If not employed presently, who was your last employer?
5. When and where was the last time you sought employment, if not presently employed?
6. Are you willing to work today if we know of an available job?
7. Do you attend church? \_\_\_\_\_  
If so, where do you attend? \_\_\_\_\_
8. What is your minister's name? \_\_\_\_\_

9. Have you sought assistance at any other churches in this area? \_\_\_\_\_  
If so, where and when?
10. If we are unable to help you, what other options do you have?
11. Would you be willing to meet with a financial counselor? \_\_\_\_\_
12. Is there a way that Hebron could better meet your spiritual needs? \_\_\_\_\_  
Please explain:
13. In your personal opinion, what do you believe it takes for a person to go to heaven?

I promise that the above information is true and correct to the best of my knowledge.  
Hebron Baptist church has my permission to check any of the above information and to  
use it to determine my assistance.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Interview by \_\_\_\_\_