SCHOLARSHIP APPLICATION

Duck River Baptist Association

Fall 2026 - Spring 2027 Academic Year

***Deadline for Application* – April 14, 2026—by 4:00 PM**

Please check one of the following:

__ I received a scholarship award from Duck River Baptist Association for 2025/26.
Amount of scholarship received for 2025/26: $ _____

__ I did not receive a scholarship award from Duck River Baptist Association for 2025/26.

PERSONAL INFORMATION:

Name: _____ _____ _____ _____
Last First Middle Preferred

Address _____ _____ _____
Street City State Zip Code

Social Security Number _____ Date of Birth _____ Phone ( ) _____

Single __ Married ___ Number of Children.____ E-mail address _____ _____

Family Information: To be completed if you were named as a dependent on your parent's 2024 Income Tax Return

Name and address of parents or guardians

Father's name _____ Address _____
Mother's name _____ Address _____
Father's Occupation _____ Mother's Occupation _____
Number of children in household (including yourself) _____
List below names of brothers and/or sisters who are in college and supported by your parents

Name of Sibling	College or University	Anticipated Graduation Date
_____	_____	_____
_____	_____	_____

CHURCH INFORMATION:

Home Church _____Pastor _____

Address: City _____State_____ Zip Code _____

P.O. Box _____ City _____ _____State_____ Zip Code _____

Association: _____ _____

Where is your church membership now? _____ How long? _____

EDUCATIONAL INFORMATION:

High School or College(s) attended:

Name. _____ City, State _____ Dates Attended. _____

Name. _____ City, State _____ Dates Attended. _____

Indicate anticipated classification for Fall 2026 (check one):

College: Freshman ____ Sophomore ____ Junior _____ Senior _____

Seminary: First Year _____ Second Year _____ Third Year _____ Other _____

Institution you anticipate attending in the Fall 2026-Spring 2027

Name of Institution: _____

Complete address of Institution: _____

Telephone number of Institution: (____) _____

Major or course of study: _____

Anticipated graduation date (mm/dd/yyyy) _____

FINANCIAL INFORMATION: *(Required!)*

Personal annual gross income & type of work $ _____ _____

Spouse's annual gross income & type of work $ _____ _____

Complete the following question if you were named as a dependent on your Parent's 2025 Income Tax Return:

Parent/guardian's annual gross income $_____ Father
_____ Mother

(Total income should include all housing allowance)

OTHER INFORMATION YOU WANT THE SCHOLARSHIP COMMITTEE TO KNOW

_____
_____
_____
_____
_____
_____
_____
_____
_____

I understand that I must be a candidate for a degree and that the scholarship funds must be used to pay for tuition and fees to enroll in, and attend, the educational institution mentioned above, or for fees, books, supplies and equipment that are **required** for the courses at the educational institution. Under these terms, the scholarship funds will be nontaxable. However, any other use of the scholarship funds will be taxable.

I hereby certify that the above statements and answers are true and correct. I understand that the information contained in this application is subject to verification by Duck River Baptist Association and I give my approval for any inquiries necessary in accomplishing said verification.

Signed _____

Date _____