

FIRST NAZARETH BAPTIST CHURCH
2026-2027 College Stipend Application Form

Please print

Name of Applicant:

Applicant's Mailing Address(include Zip Code):

Telephone:

College/University Enrolled:

Applicant's Classification: Freshman___ Sophomore___ Junior___ Senior___

Graduate 1st year_____ 2nd year_____ 3rd year_____ Other_____

(If freshman, attach letter of acceptance; others attach proof of enrollment, e.g., copy of ID card)

Have you previously received a stipend? Yes _____ No _____

Expected expenses, including tuition, room/board, books, transportation, etc: _____

Anticipated contributions, including scholarship/grant, parents/spouse, savings _____

Applicant's Signature _____ Date _____

***Applicant must be a member of First Nazareth Baptist Church. Applicant must acknowledge receipt of stipend by letter/card to the church to be eligible to receive stipend another year.**

***Application must be returned by August 15 for consideration. Return to Rosilyn Outen or JP Jones at the church office. Email completed application to Treasurer or mail to First Nazareth Baptist Church, 2351 Gervais St., Columbia, SC 29204 Attn: Scholarship Committee Email: rozouten@sc.twbc.com**

For official use only:

Date received: _____ Received by: _____