

***REV. JOHN E. AND REGINA S. NANCE MEMORIAL SCHOLARSHIP
FUND***

APPLICATION

Please complete this form. Print or type the information requested in the spaces provided. If you need additional space, you may attach a separate sheet.

**Deadline – Please return this application by January 31st to the
Nance Scholarship Committee,
3200 Washington Ave. St. Louis, MO 63103**

NAME _____ DATE _____

ADDRESS _____ ZIP _____

HOME PHONE _____ CELL _____

EMAIL _____

SS# _____ DATE OF BIRTH (mm/dd/yy) _____

PARENT(S) _____
(Mother) (Father)

ADDRESS _____
(If Different) (If Different)

HIGH SCHOOL NAME _____

CLASS RANK _____ GPA _____ ACT/SAT _____

HONORS AND AWARDS RECEIVED
(Place on separate sheet if more space is needed)

ORGANIZATIONS, ACTIVITIES, OR EMPLOYMENT INVOLVEMENT

(Place on separate sheet if more space is needed)

Washington Tabernacle Missionary Baptist Church
3200 Washington Ave.
St. Louis, Missouri 63103

COLLEGE YOU PLAN TO ATTEND _____

YOUR PLAN TO FINANCE EDUCATION: (SELF) _____ (LOAN) _____ (OTHER)_____

LIST ANY SCHOLARSHIPS OR FINANCIAL AID YOU HAVE RECEIVED.

*LIST PENDING APPLICATIONS FOR FINANCIAL AID
(Extra sheet may be used)*

TOTAL EXPENDITURES NEEDED PER SCHOOL YEAR _____

*GIVE A BRIEF DETAILED DESCRIPTION OF YOURSELF AND FAMILY
(Place on separate sheet if more space is needed)*

Applicant's Signature _____

Parent's Signature _____

Revised 4/12/95, 1/14/16, 12/17/16, 11/17/17

*Washington Tabernacle Missionary Baptist Church
3200 Washington Ave.
St. Louis, Missouri 63103*