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Robert Blackburn Continuing Education Book Scholarship Application



Student Information:

Applicant's Full Name: _____
Last First Middle Initial

Applicant's Complete Address:

STREET ADDRESS

CITY STATE/PROVINCE POSTAL CODE/ZIP CODE

Phone E-mail Address

Education Information:

Date of high school graduation: _____

Date semester/quarter begins: _____

Name of college/trade school attending:

Career Interest: _____

Church/Community/School Involvement:

List interests, activities & achievements:

Church:

Community:

Signed and submitted the attached "Assignment of Rights & Consent to Publish Scholarship Information": Yes / No

Submit completed application and required documents in an enclosed envelope to BWBC Church Administrator. There is no set deadline date for this scholarship due to the varied class schedules.

If you have questions, please contact Sherrie Sutton, Scholarship Committee Chairperson at 817-658-7163.

Applicant's Signature _____ Date _____

For office use only:

Application Received by deadline: JRS _____ EMW _____ BWBC College Oratorical _____

Required Documentation Received

Essay: JRS _____ EMW _____ BWBC College Oratorical _____

Proof of Fall Enrollment _____ Proof of Spring Enrollment _____

High School Transcript _____

Letter of Recommendation _____ Assignment of Rights & Consent _____

Proof of Required GPA _____

2018-2019 BWBC SCHOLARSHIP APPLICATION

ASSIGNMENT OF RIGHTS & CONSENT TO PUBLISH
SCHOLARSHIP INFORMATION

KNOW ALL PERSONS BY THESE PRESENTS:

THAT I, _____, do hereby give Ben Washington Baptist Church full rights to publish my name, my pertinent family information, college I am attending, photographs that I have provided, and college update information.

I understand that by execution of this agreement, I am relinquishing my rights to any compensation for reproduction, publication or use of the above information by Ben Washington Baptist Church in its print or electronic correspondence, catalog, or on its website.

I hereby specifically waive my right to review or approve THE MODIFICATION of the above Information. (Modifications may be made to accommodate size or content restrictions. Modifications will not be made to “distort” or “falsify” any information provided.)

I understand that this Agreement in no way obligates Ben Washington Baptist Church to publish or use the above-described information.

EXECUTED this date of _____.

By: _____
(Print Name)

(Signature)