

**Rev. Dr. Drew Kyndall Ross**  
*Senior Pastor*

Deacon Loucinda Southerland  
*Diaconate Chair*

Trustee Stephanie Cooper  
*Trustee Chair*

Brother Ralph L. Cash  
*Church Administrator*



Church Address:  
214 Berdan Place  
Hackensack, New Jersey 07601

Mailing Address:  
P.O. Box 1155  
Hackensack, New Jersey 07602

Office: (201) 343-9449  
Fax: (201) 343-2066

## EDUCATIONAL ASSISTANCE MINISTRY Scholarship Application

### Eligibility

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Scholarships are available to all students who are currently enrolled in a

- public, private, or parochial high school in their senior year, **OR**
- college freshman, sophomores, or juniors who are eligible or currently attend a two or four-year college/university or vocational/technical school **AND**
- enrolled in a full-time program during the 2020-2021 academic year.

It is strongly recommended that you participate in and respond to e-mail requests, workshops, and seminars associated with the Educational Assistance Ministry.

*\* Please note that scholarship awards will not exceed four years for any one student.*

### Application Requirements

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Applicants must submit a **legible and complete** 5-part application and include all required documentation listed below. If your application is illegible or documentation has not been submitted your application **WILL NOT BE REVIEWED**. All documentation must be submitted on or before the application deadline.

1. [Application Form, Certification and Authorization signatures](#)

2. [Two letters of recommendation from the following:](#)

⇒ **Pastor or Community Leader**

⇒ **Professor, Teacher or Guidance Counselor, or Academic Advisor**

3. [An \*\*official\*\* copy of your transcript that \*\*includes\*\* your Spring 2020 grades](#)

4. [Copy of \*\*SAR \(Student Aid Report\)\*\* from FASFA](#)

5. [A well written 400-word essay.](#)

⇒ Many people are being affected by COVID-19. How is this pandemic affecting you and your education? What have you learned and how will these experiences prepare you to succeed in college and beyond?

**APPLICATION DEADLINE: June 26th, 2020**

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*“A Family-Oriented Church Filled With People Who Care!”*

Website: [www.newhopebaptistchurch.org](http://www.newhopebaptistchurch.org) • Email: [admin@newhopebaptistchurch.org](mailto:admin@newhopebaptistchurch.org)

## Scholarship Terms and Conditions

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Scholarship recipients must enroll in and attend a two or four-year college/ university or vocational/technical school in the academic year following their application. Verification of enrollment is required (i.e. tuition receipt, letter from the registrar's/bursar's office, class schedule certifying enrollment).

Scholarship awards will be paid via check directly to the accredited institution in which the student enrolls. ***Awards will NOT be paid directly, nor reimbursed, to an award recipient.*** Scholarship funds will be applied toward tuition, books, fees and other appropriate educational expenses as determined by the New Hope Baptist Church Educational Assistance Ministry Scholarship Committee.

Scholarship applications and all requested documents ***MUST*** be received at the church's office (address below) ***no later than June 26th, 2020.*** Illegible applications will be provided one (1) correction attempt. Incomplete applications will not be reviewed or accepted. Any applications or documentation received after June 12th, 2020 will be returned.

Return your application and all supporting documentation:

**Mail to:**

New Hope Baptist Church of Hackensack  
P.O. Box 1155  
Hackensack, NJ 07602

***Attention:*** Scholarship Program Coordinating Committee

**OR**

**Email to:**

**[scholarships@newhopebaptistchurch.org](mailto:scholarships@newhopebaptistchurch.org)**

## Applicant Information

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First Name

Middle Initial

Last Name

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Address Line 1: \_\_\_\_\_

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

Date of Birth: (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

## Contact Information

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Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Additional individual communication during the school year *(select the preferred method and enter name):*

Instagram: \_\_\_\_\_ Facebook Messenger: \_\_\_\_\_

Other: \_\_\_\_\_

## Education

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I am currently a: *(circle one)*  
High School Senior

For 2020-2021, I will be in College as a: *(circle one below)*  
Freshman Sophomore Junior Senior

*Scores/ Cumulative GPA*

High School GPA: \_\_\_\_\_ OR College GPA: (if in college for currently) \_\_\_\_\_

ACT or SAT Score(s) *(High School Seniors Only):* \_\_\_\_\_

## College Plans for 2020-2021

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College/University School Name: \_\_\_\_\_

Student Identification Number (ID): \_\_\_\_\_

Address 1 : \_\_\_\_\_

Address 2 : \_\_\_\_\_

### **Bursar Address/Contact**

*(where the check should be sent, if approved)*

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

Phone: ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_ Contact Ext \_\_\_\_\_

Intended / Declared Major or Field of Study: \_\_\_\_\_

Anticipated Degree *(circle one)*: Associate Bachelor Other *(please describe)* \_\_\_\_\_

Anticipated Date of College Graduation: Month \_\_\_\_\_ Year \_\_\_\_\_

## Community/School Involvement

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List extra-curricular activities that you have been personally involved including during the 2019- 2020 academic year.

NAME OF ACTIVITY	YEARS OF PARTICIPATION	OFFICE(S) HELD
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**Awards and Special Honors**

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List up to three major awards, honors, or distinctions (*ex: academic, community, or school awards/distinctions*) that you have received during 2019-2020 academic year (*high school or college*).

AWARD/HONOR	DESCRIPTION OF AWARD	YEAR(S) RECEIVED
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**Career Interests**

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**Career Goal:**

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**Relevant Internship or Work Experience:**

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## Expense Estimates

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Applicants are **REQUIRED** to provide a copy of the **SAR (Student Aid Report)** you received upon completion of the FAFSA Application.

### Financial Needs - Expenses

Tuition \$ \_\_\_\_\_

Books \$ \_\_\_\_\_

Fees \$ \_\_\_\_\_

Room & Board \$ \_\_\_\_\_

Transportation \$ \_\_\_\_\_

Other Expenses \$ \_\_\_\_\_

TOTAL EXPENSE \$ \_\_\_\_\_

### Financial Resources

Family \$ \_\_\_\_\_

You - Savings \$ \_\_\_\_\_

Earnings \$ \_\_\_\_\_

Other Sources \$ \_\_\_\_\_

Other Sources \$ \_\_\_\_\_

TOTAL RESOURCES \$ \_\_\_\_\_

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Did you apply for a scholarship from **New Hope Baptist Church of Hackensack** in 2019 – 2020?    YES \_\_\_\_\_    NO \_\_\_\_\_

Did you receive a scholarship from **New Hope Baptist Church of Hackensack** in 2019 – 2020?    YES \_\_\_\_\_    NO \_\_\_\_\_

Please list any other scholarships or grants (*and the amounts*) you have been approved to receive for the 2020 – 2021 school year.

1. \_\_\_\_\_ Amount: \$ \_\_\_\_\_

2. \_\_\_\_\_ Amount: \$ \_\_\_\_\_

3. \_\_\_\_\_ Amount: \$ \_\_\_\_\_

4. \_\_\_\_\_ Amount: \$ \_\_\_\_\_

## References

Give the names of **two references** – one pastoral or community leader and the other academic. **A third (3<sup>rd</sup>) reference** can be provided by an employer and is optional. Applicants must submit reference letters from each.

**Reference #1** *(required)* \_\_\_\_\_

Reference Type:  Academic  Pastoral / Community Leader  Employer  
Is the Reference Letter attached: Yes  No

Reference Name: \_\_\_\_\_  
Address 1 : \_\_\_\_\_  
Address 2 : \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip : \_\_\_\_\_  
Phone (    ) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

**Reference #2** *(required)* \_\_\_\_\_

Reference Type:  Academic  Pastoral / Community Leader  Employer  
Is the Reference Letter attached: Yes  No

Reference Name: \_\_\_\_\_  
Address 1 : \_\_\_\_\_  
Address 2 : \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip : \_\_\_\_\_  
Phone (    ) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

**Reference #3** *(optional)* \_\_\_\_\_

Reference Type:  Academic  Pastoral / Community Leader  Employer  
Is the Reference Letter attached: Yes  No

Reference Name: \_\_\_\_\_  
Address 1 : \_\_\_\_\_  
Address 2 \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip : \_\_\_\_\_  
Phone (    ) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

## Certification and Authorization

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All of the information that I have provided in the application and in the enclosed letters/documents are true and complete to the best of my knowledge. I certify that I am currently enrolled and in good standing as a senior in high school or undergraduate student and will attend a two or four-year college/university or vocational/technical school for full-time enrollment during 2020/2021 Academic Year.

I understand that I will be required to provide grade reports as soon as possible after the end of the semester. I understand that I will not receive remaining scholarship funds if I do not provide the required grade reports, maintain full time enrollment or if my GPA falls below the required 2.0 GPA.

**Applicant Signature (required)**\_\_\_\_\_

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

**Parent/Guardian Signature**\_\_\_\_\_

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

*(Required if applicant is under 18 years of age)*



*Please attach your official transcript and required essay to complete your submission.*