



ST. PAUL COMMUNITY BC

Imagine...

Please print or type

Date: _____

Name: _____ Email: _____

Home address:

Primary contact number: _____

High School/Address: _____

Guidance Counselor Name & Phone: _____

Date of Birth: _____ Anticipated date of HS Graduation: _____

College/University you plan on attending: _____

Intended Field of Study: _____

How did you hear about the SPCBC/B-20 Leadership Scholarship? _____

Please attach (do not send separately) the required documentation detailed below. Incomplete applications will not be considered. **Applications must be received by April 30, 2010 to be considered.** See Eligibility Requirements for specific details on the below.

1. Signed application form
2. **Official** High School transcript (sealed)
3. Three (3) letters of recommendation (one each: education professional, personal and professional)
4. Autobiographical essay (double spaced, maximum two pages typed)
5. Current photo
6. Professional Resume
7. Community Service Verification letter(s) that detail at least twenty hours of volunteerism

I certify that the information that I have provided on this application is true and correct to the best of my knowledge. I authorize the Office of the Registrar to release my academic records to the SPCBC/B-20 Leadership Scholarship Fund. I give permission for the SPCBC/B-20 Leadership Scholarship Fund to release information about myself if I am awarded a scholarship based on this application.

Signature (*required*) _____ Print Name _____

Date Received (office use only): _____

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