

**WINSTONIA MCKESSON SMITH MEMORIAL SCHOLARSHIP  
SHILOH MISSIONARY BAPTIST CHURCH  
185 EDDIE ROBINSON SR. DRIVE  
BATON ROUGE, LOUISIANA 70802**

**Dear Applicant:**

The Scholarship Committee of Shiloh Missionary Baptist Church invites you to apply for the **Winstonia McKesson Smith Memorial** scholarship that will be awarded in June of this year. The scholarship is awarded based on scholastic average, church participation, and financial need. We assure you that each applicant will be given equal consideration.

We encourage you to fill out the enclosed application completely and return it in the enclosed envelope by **May 9, 2016 by 4:00 p.m.** **Please enclose a copy of your transcript. (Please do not send originals). Incomplete applications will be penalized 10 points. Hand- written applications will be penalized 10 points.**

In order to receive this scholarship, you must be a certified college junior, senior or a graduate student and have **a grade point average of at least 2.5**. Upon the presentation of your receipt that confirms your registration, a check will be issued to you.

Thank you kindly for applying for the **Winstonia McKesson Smith Memorial** scholarship. Remember the deadline for returning applications is **May 9, 2016 by 4:00 p.m.**

**Mail or bring your application (enclosed in envelope) to Shiloh Missionary Baptist Church, 185 Eddie Robinson Sr. Drive Baton Rouge, Louisiana 70802 before the deadline. Please write on the envelope, Attention: Ms. Beatrice Cosey, Scholarship Committee Chairperson. The application is also available on line at <http://shilohmbc.com/>.**

If you have any questions, please contact any one of the persons listed below.

Ms. Beatrice Cosey, Chairperson  
225-768-7349

Mrs. Iris Walker, Secretary  
225-343-3947

Enclosure

**SHILOH MISSIONARY BAPTIST CHURCH  
WINSTONIA MCKESSON SMITH MEMORIAL SCHOLARSHIP**

**STEPS THAT NEED YOUR ATTENTION**

1. Please fill out every blank in your scholarship application. This includes complete addresses and zip codes. Incomplete applications will lose 10 points. Handwritten applications will be penalized 10 points.
2. Please submit a **transcript by May 9, 2016, 2016 to verify your grade point average.**
3. Complete required 200-250 word, double-spaced essay. Essays are evaluated for content and quality of writing (spelling, grammar, punctuation).
4. Include yourself on the part of the application that asks you to list the number of persons supported by parents/guardians.
5. Be sure to circle the total income of the entire household. If you do not circle an answer, you will not receive any points in this category.
6. On the application, indicate the total number of persons in the household supported by parents/guardians/applicant and/or spouse, if applicable.
7. **All letters of recommendation must be signed by the pastor, pastor's designee and/or ministry leader to be accepted.**
8. The application may be found on line at <http://www.shilohmbc.com>.

**SHILOH MISSIONARY BAPTIST CHURCH  
185 EDDIE ROBINSON SR. DRIVE  
BATON ROUGE, LOUISIANA 70802  
FRED JEFF SMITH, PASTOR**

**WINSTONIA MCKESSON SMITH MEMORIAL SCHOLARSHIP APPLICATION**

**PLEASE SUBMIT A CURRENT TRANSCRIPT BY May 9, 2016**

**DIRECTIONS: This application must be typed.** All sections must be completed. Write N/A if question does not apply.

INDICATE YOUR STATUS:       \_\_\_\_\_ COLLEGE JUNIOR  
  \_\_\_\_\_ COLLEGE SENIOR  
  \_\_\_\_\_ GRADUATE STUDENT

Name \_\_\_\_\_

Home Address \_\_\_\_\_ Zip code \_\_\_\_\_ Phone \_\_\_\_\_

Birthdate \_\_\_\_\_ Sex \_\_\_\_\_ Marital Status \_\_\_\_\_

Your Grade Point Average: \_\_\_\_\_

Name of University Attending \_\_\_\_\_

Expected Graduation Date \_\_\_\_\_

Father/Guardian  
Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_

Mother/Guardian  
Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_

Do you live with both parents? \_\_\_\_\_ If not, with whom? \_\_\_\_\_

Total number supported by parents or guardian \_\_\_\_\_ (including parents)

**For Married Applicants**  
Spouse's  
Name \_\_\_\_\_

Of what church are you a member?  
\_\_\_\_\_

Pastor's Name

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Address \_\_\_\_\_ Zip Code

\_\_\_\_\_ Phone \_\_\_\_\_

When did you join church?

Month \_\_\_\_\_ Year \_\_\_\_\_

Church Auxiliaries/Ministries in which you are or have been active in the last year. Be sure to include Sunday school and/or Bible Study. If additional space is needed, please attach a separate sheet. (8 points)

**Auxiliary/Ministry**

**Sponsor or President**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Include letter from sponsor or ministry leader that can attest to how active you have been in an auxiliary/ministry in the last year. (7 points)**

List school and community clubs/organizations in which you have been active in the last year. If additional space is needed, please attach a separate sheet. (8 points)

**Club/Organization(s)**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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List awards that you have received in the last year. (7 points)

**Awards**

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**Essay**

**Indicate in essay form (200-250 words), double-spaced, how the church has been or is an influential factor in your life. Also, indicate how you expect to use the church's teaching in your future life. (Attach separate sheet) (20 points)**

**Letter of Recommendation**

**Attach letter of recommendation from your pastor or his/her designee. Letter must be on church letterhead. (Attach separate sheet) (10 points)**

Total number supported by parents or guardian (including self)

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Total number supported by applicant \_\_\_\_\_ and or spouse \_\_\_\_\_ (include self)

**Applicant's income (if any)**

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To certify that the information given on this application is true and correct to the best of your knowledge, please sign below:

Your signature \_\_\_\_\_ Date \_\_\_\_\_

**THIS SECTION IS TO BE COMPLETED BY THE PARENT, GUARDIAN AND/OR APPLICANT.**

Combined income of entire household. (Circle One) You must circle one in order to qualify for points.

Under \$10,000	\$50,001 - \$60,000
\$10,001 - \$20,000	\$60,001 - \$70,000
\$20,001 - \$30,000	\$70,001 - \$80,000
\$30,001 - \$40,000	\$80,001 - \$90,000
\$40,001 - \$50,000	over \$100,000

**Attest:**

I hereby certify that this information is true, accurate and correct to the best of my knowledge and that I will cooperate with the committee's effort to verify the information if it becomes necessary.

Parents/Guardians Signature \_\_\_\_\_ Date \_\_\_\_\_

**THE SCHOLARSHIP COMMITTEE**

Ms. Sheri Benton  
Ms. Beatrice Cosey, Chairperson  
Dr. Willie Ennis III  
Mrs. Betty Fisher  
Mrs. Clarice Gipson, Donaldson Chapel Baptist  
Mrs. Thelma Jones  
Dr. Betty Kennedy

Mrs. Cathy Lockett  
Mrs. Pamela Mackie  
Mrs. Melodnee O'Conner  
Mrs. Rose Thomas  
Mr. Nnamdi Thompson  
Mrs. Iris Walker  
Mrs. Josie Williams

**SHILOH MISSIONARY BAPTIST CHURCH  
SCHOLARSHIP COMMITTEE**

**EVALUATION FORM**

Applicant \_\_\_\_\_

Date \_\_\_\_\_

Number of Points Received \_\_\_\_\_

\_\_\_\_\_ **I. EDUCATIONAL BACKGROUND**

A. Grade Point Average

2.5 - 2.9                      5 pts. \_\_\_\_\_

3.0 - 3.4                      10 pts. \_\_\_\_\_

3.5 - 3.7                      15 pts. \_\_\_\_\_

3.8 - 4.0                      20 pts. \_\_\_\_\_

B. School Club Participation in last two years.

(1 point each, maximum 5 points)

C. Awards in last two years

(1 point each, maximum 3 points) \_\_\_\_\_

\_\_\_\_\_ **II. CHURCH PARTICIPATION**

A. Church Ministries affiliation and Participation

(Rating of 5-8 points, 4-6 points, 3-4 points, 2-2 points, 1-1 point) \_\_\_\_\_

B. Participation in Church related activities in the year (example Workshops, Lock-In, Retreats, etc.)

(1 point each, maximum 5 points) \_\_\_\_\_

Any activity in which youth is paid is not included

C. 70% Christian Education Attendance

(25 points, over 70% 1 point per Sunday/Monday/Wednesday) \_\_\_\_\_

\_\_\_\_\_ **III. ECONOMIC NEED (maximum 20 points)**

Determine by scale based on gross income and number of dependents.

\_\_\_\_\_ **IV. APPLICATION NEATLY SUBMITTED, CORRECT SPELLING AND GRAMMAR (Maximum 5 points)**

\_\_\_\_\_ **V. SUB-TOTAL**

\_\_\_\_\_ **VI. PENALTIES (LESS)**  
Incomplete Application \_\_\_\_\_  
Handwritten Application \_\_\_\_\_

\_\_\_\_\_ **VII. TOTAL POINTS RECEIVED**



## ECONOMIC NEED SCALE

INCOME	DEPENDENTS				
	1	2-3	4-5	6-7	8 OR MORE
10,000 - Below	20	20	20	20	20
10,001 - 20,000	18	19	20	20	20
20,001 - 30,000	17	18	20	20	20
30,001 - 40,000	16	17	20	20	20
40,001 - 50,000	15	16	17	20	20
50,001 - 60,000	14	15	16	17	18
60,001 - 70,000	13	14	15	16	17
70,001 - 80,000	12	13	14	15	16
80,001 - 90,000	10	11	12	13	14
90,001 - 100,000	8	9	10	11	12
100,001 - Above	6	7	8	9	10