

**ROBERTA R. PAYNE MEMORIAL EDUCATION 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 **Roberta R. Payne Memorial Education** scholarship that will be awarded in **July** of this year. The scholarship is awarded based on grade point average, church/school/club participation, economic need, letter of recommendation from teacher/school principal, essay on what the church means to you, and application typed and neatly completed.

*Please complete your application on-line. Applications can be found on Shiloh's web site at [www.shilohbr.com](http://www.shilohbr.com). Please email your application to [jljones@shilohmbc.com](mailto:jljones@shilohmbc.com), or mail to 185 Eddie Robinson Sr. Dr., Baton Rouge, Louisiana 70802 before the deadline. Please write on the envelope, Attention: Rev. Jennifer Jones, Scholarship Committee Chairperson.*

*Applications will be distributed Sunday April 16, 2023 thru deadline to return applications on-line or by mail is May 21, 2023.*

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

Rev. Jennifer Jones, Chairperson  
[jljones@shilohmbc.com](mailto:jljones@shilohmbc.com)  
225-343-0640

Ms. Jackie Williams  
225-388-9998  
[jwilliams@shilohmbc.com](mailto:jwilliams@shilohmbc.com)

Enclosure

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**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 on or before **May 21, 2023** to verify your grade point average.
3. Complete required 200-250 word, doubled-spaced essay. Essays are evaluated for content and quality of writing (spelling, grammar, punctuation).
4. Applications must be **returned** by Sunday, May 21, 2023 to the Scholarship Mailbox in a sealed envelope, via email [jljones@shilohmbc.com](mailto:jljones@shilohmbc.com), or mail to 185 Eddie Robinson Sr. Dr., Baton Rouge, Louisiana 70802. Please write on the envelope, Attention: *Rev. Jennifer Jones, Scholarship Committee Chairperson.* **NO EXCEPTIONS!**
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 teacher/school principal, Sunday school/Bible study teacher, pastor or his/her designee or ministry leader to be accepted.**
8. Please include a current or preferably graduation photo when submitting your application.

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**I. OVERVIEW**

The family of Roberta R. Payne, daughters Vanessa Payne and Karroll Payne McGregor, recommended the implementation of this scholarship in 2011. **The Roberta R. Payne Memorial Education Scholarship is targeted for All Education majors only.** The Scholarship Committee of the Shiloh Missionary Baptist Church will administer the program.

**II. DUTIES OF COMMITTEE**

- A. To set up guidelines governing the scholarship program.
- B. To design instruments for evaluating applicants in an objective manner.
- C. To annually publicize the scholarship program.
- D. To annually select a recipient based on a set of objective criteria.
- E. To periodically evaluate the Roberta R. Payne Memorial Education scholarship program.

**III. FINANCING OF PROGRAM**

Money is generated from the family of Roberta R. Payne, daughters Vanessa Payne and Karroll Payne McGregor.

**IV. AMOUNT OF SCHOLARSHIP**

A scholarship will be awarded **annually in the amount of \$1,000.**

**V. REQUIREMENTS OF SCHOLARSHIP APPLICANTS**

- A. Must be a member of a Christian Church for at least one year as evidenced by a letter from the pastor/designee.
- B. Must be certified in the area of **Education** as evidenced by a copy of an official transcript.
- C. Must have a grade point average of at least **2.5**.
- D. Must be a certified college junior, senior or graduate student.
- E. Must include a **current graduation photo** when submitting your application.

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**VI. GUIDELINES FOR AWARDING SCHOLARSHIP**

- A. All interested persons must fill out an application and submit it to the scholarship committee by a deadline set by the committee.
- B. An official copy of a college transcript **must** accompany the application.
- C. **Letters are emailed to ministry leaders requesting information on each applicant for verification.**
- D. After all information is back, the committee meets to determine the recipient.
- E. The committee evaluates each applicant based on a set of criteria previously adopted. The criteria are attached.
- F. Other than the grade point average, the information reported is classified as being true.
- G. After points are totaled for each applicant, the applicant's name and their total points are listed and the recipient is announced. No committee member can determine the recipient until applicant's points have been totaled.
- H. The name of the scholarship recipient is withheld until the Sunday that the scholarship is awarded.
- I. The recipient of the scholarship may collect the scholarship upon presentation of verification that he/she is accepted in school.
- J. If a ministry/auxiliary has only been in existence for six (6) months or less, it will not be considered for that year.
- K. Must exhibit active church/school/club participation (recommendation letters from pastor or his/her designee, teacher/school principal and/or ministry leader).
- L. A **recipient** of a Roberta R. Payne Memorial Education Scholarship **cannot** apply again; however, **an applicant who did not win may reapply the following year. NOTE, an applicant cannot apply for or be awarded more than one scholarship per year that is administered by the Shiloh Missionary Baptist Church!**
- M. A member of the Shiloh Scholarship Committee may apply for the Roberta R. Payne Memorial Education Scholarship; however, he/she may not participate in the evaluation process.

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**VII. PROCEDURE FOR BREAKING TIES**

In case of a tie, the person with the greatest economic need would be declared the recipient. If this is the same, the person who is more actively involved in church work will come before the other. If everything is the same, the committee will vote to break the tie and the recipient will be given 1 point.

**VIII. PENALTIES**

- A. Incomplete applications will be penalized ten points.***
- B. Handwritten applications will be penalized ten points.***

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Fred Jeff Smith. Pastor**

**PLEASE SUBMIT A CURRENT TRANSCRIPT On or Before May 21, 2023.**

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

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

Name \_\_\_\_\_ Email Address \_\_\_\_\_

Home Address \_\_\_\_\_ City/State \_\_\_\_\_

Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

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

**Grade Point Average:** College \_\_\_\_\_

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

**What is your major?** \_\_\_\_\_

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

Father's Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_

Mother's Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_

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

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

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

When did you join? Month \_\_\_\_\_ Year \_\_\_\_\_

Do you attend Sunday school? \_\_\_\_\_ if yes, indicate your teacher/teachers \_\_\_\_\_

Do you attend Bible Study? \_\_\_\_\_ If yes, indicate your teacher/teachers \_\_\_\_\_

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**

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**Include a 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) \_\_\_\_\_

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

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

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	\$90,001 - \$100,000
		\$100,001 - Above

**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.

Parent's/Guardian's or Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

***THE SCHOLARSHIP COMMITTEE***

*Fred Jeff Smith, Pastor*

*Mrs. Betty Fisher*

*Mrs. Je'ne Jones*

*Mrs. Thelma Jones*

*Dr. Betty Kennedy*

*Mrs. Carmen Victorian*

*Ms. Iris Walker, Secretary*

*Mrs. Tonya Young*

***Rev. Jennifer Jones, Director of Charitable Foundation***

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**EVALUATION SHEET**

APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

Number of Points Received

_____	I.	<b>EDUCATIONAL BACKGROUND</b> Grade Point Average 2.5 - 2.9        4 pts _____ 3.0 - 3.4        6 pts _____ 3.5 - 3.7        8 pts _____ 3.8 - 4.0       10 pts _____
_____	II.	<b>CHURCH, SCHOOL AND COMMUNITY PARTICIPATION</b> <b>(Maximum 30 points)</b> A. Church (15 points) 1. Letter from church sponsor (7 points) _____ 2. Ministry activities (8 points, <i>1 point each</i> ) _____ B. School/Community (15 points) 1. Club participation in the last year (8 points) _____ 2. Awards in the last year (7 points) _____
_____	III.	<b>ECONOMIC NEED (Maximum 30 points)</b> Determined by scale based on income and number of dependents
_____	IV.	<b>APPLICATION COMPLETE AND NEATLY SUBMITTED</b> <b>(Maximum 5 points)</b>
_____	V.	<b>PERSONAL STATEMENTS (Maximum 30 points)</b> A. Letter of Recommendation from pastor or his/her designee (10 points) _____ B. Essay (20 points) _____
_____	VI.	<b>LESS PENALTIES</b> A. Incomplete Application _____ (10 points) B. Handwritten Application _____ (10 points)
_____	VII.	<b>TOTAL POINTS RECEIVED</b>

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**ECONOMIC NEED SCALE**

<b>INCOME</b>	<b>DEPENDENTS</b>				
	1	2-3	4-5	6-7	8 or more
Below 10,000	30	30	30	30	30
10,001 - 20,000	29	29	30	30	30
20,001 - 30,000	27	28	30	30	30
30,001 - 40,000	25	27	29	30	30
40,001 - 50,000	23	26	28	30	30
50,001 - 60,000	21	25	27	30	30
60,001 - 70,000	19	24	26	30	30
70,001 - 80,000	17	23	25	29	30
80,001 - 90,000	15	22	24	28	30
90,001 -100,000	13	21	23	27	29
100,001 - Above	12	20	22	26	29