



SCHOLARSHIP APPLICATION
For Undergraduate Higher Education
2023-2024
Academic Year

(due no later than
4 pm, Monday,
May 15, 2023)

WEST UNIVERSITY BAPTIST/CROSSPOINT/CITYRISE CHURCHES
SCHOLARSHIP APPLICATION
2023-2024 Academic Year

Scholarship Requirements:

- Member of West University Baptist/Crosspoint Church/CityRise Missouri City/CityRise Emmanuel/West U Chinese Church/Iglesia Crosspoint for a minimum of 1 year, demonstrating active participation.
- Previously accepted into an institution of higher learning
- Pursuing an *undergraduate degree*
- Average passing grades in current school year
- Contributes consistently to the life of our Church

Current scholarship funds are available through an endowment fund managed by the Baptist Foundation, and an endowment managed by Houston Baptist University. The amount depends on the available earnings in those funds, at the time of disbursement.

INSTRUCTIONS (*please read carefully and thoroughly*)

1. Fill out attached application.
2. Along with the application, attach an essay (no more than 2 typed pages) giving the Scholarship Committee any additional pertinent information that you believe would be helpful in their decision-making. Include an essay, whether you have previously received this scholarship or not.
3. Attach a copy of your *college transcript* for the current school year or a *copy of your high school grade records* for the current school year, if you are a senior in high school.
4. Any questions on this process can be directed to the Church's Business Office (713-295-2110).
5. Submit your application and essay to the reception desk at either West University Baptist or Crosspoint in a sealed envelope marked "Scholarship Application."
6. You can also mail your application and essay to:
Business Office
West University Baptist Church
6218 Auden
Houston, TX 77005
SCHOLARSHIP APPLICATION
7. You can also email your scanned application to liana.fairbanks@cityrise.org.
8. **All applications/essays must be received no later than 4:00 pm Monday, May 15, 2023.**
9. **Incomplete submissions will not be considered.**
10. **Late submissions will not be considered.**

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APPLICANT INFORMATION

Name of Applicant: _____ Birthdate: _____

Home Address: _____ Student ID/Account. # _____
(Required-scholarship cannot be remitted without this)

City, State, Zip _____ Telephone # (_____) _____

If married, provide the following information: Spouse's Name _____

Spouse's Occupation: _____ If you have dependents, please list their
names and ages : _____

If single, provide the following information about your parents:

Name(s) Father: _____ Mother: _____

Parents' Address: _____

City, State, Zip: _____

Parents' Occupations: _____

Number of brothers and sisters in family: _____ Are any attending college now? (Circle one) Yes No

If yes, where attending? _____

FINANCIAL INFORMATION

Upon whom will you depend for finances? (Check all that apply) ☐ Self ☐ Father ☐ Mother

☐ Spouse ☐ Other: (Explain) _____

If you plan to work part-time, where ? _____

Will you be receiving other scholarship funds? (Circle One) Yes No If yes, explain from whom and
the amount you expect to receive: _____

Est. Cost per semester: Tuition \$ _____ Books: \$ _____ Room & Board \$ _____

CHURCH INFORMATION

Have you been baptized? _____ At what age? _____

Are you a church member?

WUBC/WUCC _____ Crosspoint/Iglesia CP _____ CRMC/CR Emmanuel _____

How long have you been a member of our church? _____

List activities in which you participate at any of our CityRise campuses _____

ACADEMIC INFORMATION

Name of High School: _____ Date of Graduation: _____

Address: City, State, Zip: _____

What school, college or university do you plan to attend in 2022-2023? _____

Address and telephone number of school's Financial Aid Office:

NUMBER/STREET/PO BOX _____

CITY _____ STATE _____ ZIP CODE _____

(If you are granted a scholarship, the address you give us above is where we will send the check.)

Is your college on quarter or semester plan? _____

How many credit hours do you expect to earn during the academic year of this scholarship? _____

Expected date of graduation _____

Have you previously received a scholarship from our church? _____

If so, for what academic year(s)? _____

What is the name of the church you attend/will attend while at school? _____

****If you previously received a scholarship from our Church, please attach a copy of your grades for the most recent year for which you received a scholarship from us****

TRUST REQUIREMENTS

The instructions from the fund donor were "to assist members of said Church with the costs of higher education."

The Trust Agreement governing the Scholarship Funds states the following:

"All grantees of scholarships must maintain an average passing grade, to be eligible for aid hereunder. A grantee who fails two subjects in one semester shall be ineligible for further aid until he brings his average up to passing. Any grantee dismissed from an institution for disciplinary reasons shall be ineligible for further aid."

"Grantee shall not engage in gambling, nor in drug abuse, nor be a frequent user of alcoholic beverages."

My signature below affirms that I am in compliance with the trust requirements. It also gives the Scholarship Committee my permission to verify any information I have provided or attested to herein on my application and/or essay.

Signed _____ Dated _____