

## **APPLICATION FOR SBCMC STUDENT SCHOLARSHIP GENERAL INFORMATION & INSTRUCTIONS**

The Southern Baptist Church Music Conference values the educational process and development of students. We offer student scholarships to our annual meeting each year. The awarded scholarship can be used to help cover the conference registration fee and expenses. Scholarship recipients will be notified approximately one month prior to the conference dates.

### **ELIGIBILITY:**

- Scholarships are available to college and seminary students who are planning careers in church music
- Criteria for selection include merit as well as need
- Students must be registered for the conference by February 20, 2024

### **APPLICATION DEADLINE:**

- February 20, 2024

### **RETURN COMPLETED FORM TO:**

Ken Reich  
SBCMC Interim Treasurer  
176644 N. 2790 Rd.  
Duncan, OK 73533

**NOTE:** Please email [kenrsbmc@gmail.com](mailto:kenrsbmc@gmail.com) if you have questions regarding the scholarship.

## APPLICATION FOR SBCMC STUDENT SCHOLARSHIP

Name of Applicant: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mailing Address:

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

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

College or Seminary Currently Attending: \_\_\_\_\_

Major: \_\_\_\_\_ Emphasis: \_\_\_\_\_

Projected Graduation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Career/Ministry Plans: \_\_\_\_\_

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Church You Attend/Serve: \_\_\_\_\_

Name of Minister of Music: \_\_\_\_\_  
(if you are not currently serving)

Name of Pastor: \_\_\_\_\_

Church Where Your Membership Is (if different): \_\_\_\_\_

What is your involvement in the church you currently attend? (include music and other ministries)

How do you expect to benefit from this scholarship?

## RECOMMENDATIONS

We, the undersigned, fully support this applicant to receive the SBCMC Student Scholarship to attend the 2024 Southern Baptist Church Music Conference. Our signatures are witness to this person's character, calling, work-ethic, cooperative spirit, and active participation in the church and/or classroom. We grant permission for a representative from the SBCMC to contact us by phone.

### **Minister of Music: (or Pastor, if you are currently serving)**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

### **Professor in the Area of Your Major:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

### **Academic Advisor:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

### **Other Reference:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_