

Bluefield College Virginia Baptist Housing Scholarship - Application

Student Contact Information:

First:	Middle:		Last:
Street:			
State:	te: Zip code:		
Phone:		Email:	
Student Signature:			
Church:			
Full Church Name:			
Senior Pastor Name:			
Phone:		Email:	
Contact Information fo	or Guardian/Ministe	r Employed b	y a Virginia Baptist Church:
First:	Middle:		Last:
Street:			
State:	Zip co	ode:	
Position/Title:			
Years Employed in the M	Ministry:		
☐ I am a minister of a V	irginia Baptist church	and my churc	ch will provide a letter to Bluefield Colleg
detailing my position wi	th the church.		
Student Signature:			Date:
-			Date:

Please return this application and the associated documentation to Bluefield College by mail, fax, or email no later than August 1st, 2020. Your application will be promptly reviewed, after which you will be contacted by a member of our Admissions team to discuss the outcome. Thank you again for taking the time to apply for this wonderful scholarship opportunity. You will be hearing from us soon!