# SALEM MISSIONARY BAPTIST CHURCH

**305 East 21st Street, Brooklyn, New York 11226**
**Dr. James A. Thornton, Pastor**

## THOMAS J. BOYD SCHOLARSHIP APPLICATION

**Freshmen** ___
**Sophomore** ___
**Junior** ___
**Senior** ___
**Graduate School** ___

**Date:** _____

**Please follow instructions, print clearly and complete all information.**

**Personal Data:**
Name_____

Address_____/ _____

City _____ State _____ Zip Code _____

Home Telephone Number _____
Cell Phone Number_____
E-Mail Address _____

**Church Data:**
When did you become a member of Salem? _____ /_____/_____

Please list all church ministries, activities, etc., in which you are an active member. **Have advisor complete and sign the verification form(s). (Please submit with application.)**

_____
_____
_____
_____

**Educational Background:**
Name and location of accredited institution of higher learning to which you applied have been accepted and will attend in the fall of 2022.

_____
_____

What is your GPA? _____ **(Please provide an official copy of your High School, College or Graduate school transcript with application)**

List the organizations and extra-curricular activities that you were a part of in high school or college and/or community. **(Have advisor complete and sign the verification form(s). (Please submit with application**.)

_____
_____
_____
_____
_____

Proposed Career_____

Expected year of graduation from college_____

**I hereby certify that the information provided in this application is true and correct.**

_____
**Signature of Applicant /Date**

**Rev. James A. Thornton, Pastor**