



Berean Missionary Baptist District Assoc. Laymen's Auxiliary Scholarship Application

Please Type or Print Legibly

First Name		Middle Initial		Last Name	
------------	--	----------------	--	-----------	--

Address		City		State		Zip	
---------	--	------	--	-------	--	-----	--

Phone Number _____
E-Mail Address _____

Parents'/Guardians' Name _____	
Phone Number _____	

High School _____	City _____	State _____	Zip _____
-------------------	------------	-------------	-----------

Phone Number _____	Cumulative GPA _____	Graduation Date _____
--------------------	----------------------	-----------------------

Laymen Sponsor _____
Registered _____

Applicant's Church _____
Pastor _____

City _____	State _____	Zip _____
Church Phone _____		
Church Registration _____		

College or University Attending _____

Phone _____ City _____ State _____ Zip _____

Applicant's Signature _____

Date _____

Please submit a picture with the application.

Please return all forms to Laymen's Scholarship Committee.

Attention: Deacon Roy L. Jones

Email: royjone58@spectrum.net. Applications must be received by July 3, 2026, for consideration.