



2019 SCHOLARSHIP APPLICATION

Due April 22nd

The FOUNTAIN of PRAISE™
Dr. Remus E. Wright, Senior Pastor



Dr. Remus E. Wright
Senior Pastor

Mia K. Wright
Co-Pastor

Praise be to the God and Father of our Lord Jesus Christ, who has blessed us in heavenly realms with every spiritual blessing in Christ. Ephesians 1:3 (NIV)

Dear Graduates,

Congratulations! You are certainly worthy of accolades for your diligence and hard work. For those who are re-entering academia, we applaud your desire to continue your education.

As a demonstration of our commitment to excellence in education, The Fountain of Praise sponsors this scholarship program to plant seeds in the lives of our students.

It remains an exciting secret what God will do next! We pray that you enter this next phase in your life with the confidence of knowing that the Lord is with you always.



Scholarship Application Checklist

First Initial

Last Name

[illegible]

Ensure that all items listed below have been completed prior to submitting your scholarship package.

- ☐ Scholarship Application (Completed, signed and dated by applicant)
- ☐ Ministry Recommendation Form
- ☐ Academic Recommendation Form
- ☐ Color Graduation Photograph (Minimum size 4" x 6")
- ☐ Official school transcript
- ☐ Acceptance letter(s) to a post secondary institution
(university, college, vocational school or trade program)
- ☐ Parent Contact Form
- ☐ Copy of Student Financial Aid Report (SAR)
- ☐ Typed essay



Scholarship Application

Review the Scholarship Program guidelines and ensure that all requisites are followed.

Applicants should meet the following criteria:

- Be of Christian character.
- Be a member of The Fountain of Praise for at least one year, except where specified.
- Be an active church participant in at least one ministry, for a minimum of one year, except where specified.
- Minimum Grade Point Average (GPA) 2.5

Applicants must complete the following:

- Complete The Fountain of Praise Scholarship Application.
- Attach a graduation photograph no smaller than 4" x 6".

**Applicant's picture should be enclosed in an envelope and attached to the application. The photo should be identified with the applicant's name typed on a label affixed to or written on the back of the photo. Polaroid, instant photos or color copies of photographs will not be accepted.
- Provide proof of acceptance to a post secondary institution.
- Complete recommendation forms.

Incomplete and/or late application packages will not be accepted for consideration.

Do not under any circumstances contact a funding source or church official.

Violation of these policies will disqualify you from consideration.

DEADLINE : April 22, 2019

Personal Information

Application
Page 1

Last Name

[illegible]

1

[illegible]☐ Female

Apt.

[illegible]

--	--	--	--	--

Zip Code

[illegible]

--	--

--	--	--	--	--

Cell Phone Number

	-		-	
--	---	--	---	--

--	--	--	--

-

--	--	--	--

-

--	--	--	--

[illegible]

Apt.

[illegible]

--	--	--	--	--

Zip Code

[illegible]

--	--

--	--	--	--	--

			-				-					
--	--	--	---	--	--	--	---	--	--	--	--	--

[illegible][illegible]

Zip Code

[illegible]

--	--

--	--	--	--	--

Grade Point Average

--	--	--	--	--	--	--	--

[illegible]

--	--

/

--	--	--	--

Church Activities

List all church activities in which you have participated (for example: Youth Ministry, Choir or Usher Board)

Ministry/Auxiliary or Event

Years Participated

		-		
		-		
		-		
		-		
		-		
		-		
		-		
		-		

Leadership

List leadership positions to which you have been elected or appointed.

**Codes: A=President B=Vice President C=Secretary D=Treasury E=Group Leader
F=Representative G=Chairperson H=Captain or Co-Captain I=Other**

Organization, Club or Activity

Code

Years Participated

		-		
		-		
		-		
		-		
		-		
		-		
		-		

First Initial

Last Name

Social Security Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

			-			-					
--	--	--	---	--	--	---	--	--	--	--	--

List all honors you have received (for example: Academic, Sports, Community Service and Clubs).

Codes: FR=Freshman SO=Sophomore JR=Junior SR=Senior O=Other

Name of Honors

Code

Year Awarded

Extracurricular Activities

List all organizations or activities in which you have participated (for example: Student Government, Athletics and Drama Club.)

Codes: FR=Freshman SO=Sophomore JR=Junior SR=Senior O=Other

Name of Activity

Code

Years Participated

		-		
		-		
		-		
		-		
		-		
		-		
		-		

First Initial

Last Name

Social Security Number

																		-			-				
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	---	--	--	---	--	--	--	--

List current and previous employment.

	Employer Name	Approximate hours per week
1		
	Employer Address	
	City	State Zip Code
	Position	Date of Employment (month/year)
2		
	Employer Address	
	City	State Zip Code
	Position	Date of Employment (month/year)
3		
	Employer Address	
	City	State Zip Code
	Position	Date of Employment (month/year)

First Initial	Last Name	Social Security Number
		- - -

First Initial	Last Name	Social Security Number

Application
Page 6

We will use the information you supply on this form solely to evaluate you as a candidate for various scholarships. This information will not be available to third parties or for any other purpose.

Date (month/day/year)

April 22, 2019

Mailing Address

Scholarship Committee
14075 S. Main Street
Houston, Texas 77035



Social Security Number

□

[illegible]

--	--	--

--	--

--	--	--	--



Annual Scholarship Program

An applicant must meet criteria of membership, participation, academic standing, and post secondary enrollment plans. No recipient may receive more than one scholarship.

All applications must be mailed to:
The Fountain of Praise
Scholarship Committee
14075 S. Main Street
Houston, Texas 77035

Deadline : April 22, 2019
U.S. Mail Delivery Only

Applications must be postmarked by the deadline. Applications postmarked after the deadline will not be reviewed. Incomplete application packages will not be accepted for consideration.

Transcripts are required for all scholarship applicants. Transcripts included in the application package must include class rank and grade point average. Transcripts must be mailed directly to the scholarship committee by the school registrar. You must submit your request form to the registrar early enough to ensure receipt by the due date.

The applicant must graduate by the end of the spring or summer term immediately following awarding of the scholarship or a mid-term graduate at the conclusion of the semester immediately preceding the awarding of the scholarship. A final transcript documenting graduation date will be required of all recipients.

Funds will not be disbursed until final transcripts and required documentation are received.



14075 S. Main Street, Houston, TX 77085
Telephone: (713) 433-1824 Facsimile: (713) 433-4600

SCHOLARSHIP PROGRAM ACADEMIC RECOMMENDATION FORM

(To be completed by teacher, counselor or coach)

Deadline: April 22, 2019

Applicant (Insert Text)

First Name

Last Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

The student requesting this recommendation is applying to The Fountain of Praise Scholarship Program. Your recommendation will be used in the selection process. Please complete this form and return it to the Scholarship Committee.

Academic Evaluator

First Name

Last Name

Mailing Address

City

State

Zip Code

Day Phone Number

Evening Phone Number

Academic Affiliation

Title & Position

1. How long have you known the applicant?

2. In what capacity have you interacted with the applicant?
(Teacher, Counselor, Coach, School Administrator)

PLEASE COMPLETE REVERSE SIDE OF THIS FORM

Applicant
First Name

Academic Recommendation Form Page 2/2

Last Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please rate the applicant on the following categories to the extent that you have observed, using the following scale.

1	2	3	4	5
Strongly Agree	Agree	Not Observed	Disagree	Strongly Disagree

- _____ Demonstrates interest and concern for the welfare of others.
- _____ Provides leadership to others in either traditional or nontraditional settings.
- _____ Sets personal goals and persists to the achievement of these goals.
- _____ Conducts a realistic self-appraisal of personal strengths and weaknesses.
- _____ Identifies support and resources when needed.
- _____ Acquires knowledge and/or skills in areas of need or interest.
- _____ Demonstrates confidence.
- _____ Accepts personal responsibility.
- _____ Works effectively with others.

Please provide additional comments or information about the applicant.



14075 S. Main Street, Houston, TX 77035
Telephone: (713) 433-1824 Facsimile: (713) 433-4600

**SCHOLARSHIP PROGRAM
MINISTRY RECOMMENDATION FORM**
(To be completed by a ministry leader of The Fountain of Praise)

Deadline: April 22, 2019

Applicant (Insert Text)

First Name

Last Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

The student requesting this recommendation is applying to The Fountain of Praise Scholarship Program. Your recommendation will be used in the selection process. Please complete this form and return it to the Scholarship Committee.

Ministry Leader Name

First Name

Last Name

Mailing Address

City

State

Zip Code

Day Phone Number

Evening Phone Number

Ministry

Title & Position

1. How long have you known the applicant?

2. In what capacity have you interacted with the applicant?

PLEASE COMPLETE REVERSE SIDE OF THIS FORM

Applicant
First Name

Ministry Recommendation Form Page 2/2

Last Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please rate the applicant on the following categories to the extent that you have observed, using the following scale.

1	2	3	4	5
Strongly Agree	Agree	Not Observed	Disagree	Strongly Disagree

- _____ Demonstrates interest and concern for the welfare of others.
- _____ Provides leadership to others in either traditional or nontraditional settings.
- _____ Sets personal goals and persists to the achievement of these goals.
- _____ Conducts a realistic self-appraisal of personal strengths and weaknesses.
- _____ Identifies support and resources when needed.
- _____ Acquires knowledge and/or skills in areas of need or interest.
- _____ Demonstrates confidence.
- _____ Accepts personal responsibility.
- _____ Works effectively with others.

Please provide additional comments or information about the applicant.



14075 S. Main Street, Houston, TX 77035
Telephone: (713) 433-1824 Facsimile: (713) 433-4600

SCHOLARSHIP PROGRAM

PARENT CONTACT FORM

(To be completed by applicant's parents)

Deadline: April 22, 2019

Applicant (Insert Text)

First Name

Last Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please complete this form and return it with the application.

Parents Information

First Name

Last Name

Mailing Address

City

State

Zip Code

Day Phone Number

Evening Phone Number

Email Address

Cell Phone Number

Parent's Signature

Date

Instructions: Copies of the Scholarship Disbursement Correspondence will be forwarded to the contact information listed above.

Deadline: April 22, 2019

2021 SCHOLARSHIP APPLICATION



The
FOUNTAIN
of
PRAISE

Dr. Remus E. Wright, Senior Pastor