



# *Alaska Baptist Foundation*

## **Mack D. Parker Memorial Scholarship**

**Please type or print**

Last name: \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Student # (if available) \_\_\_\_\_

Resident address:

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

E-mail address:

Mailing address (if different from residence):

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home/cell phone: (      )      Work: (      )      DOB (mm/dd/yy):

Marital Status

Single      Married      Divorced

Name of spouse: \_\_\_\_\_ Is your spouse a student?      Yes      No

Number of dependents (other than spouse):

Which Southern Baptist seminary will you be attending?

Mailing address:

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone number: (      ) \_\_\_\_\_

Are you, your spouse or your parents employed at the Institution? If yes, do you receive additional benefits from this job above the salary? (i.e., reduced tuition, room and board costs, etc.)      Yes      No

Classification:      First year      Second year      Third year      Other

If “other”, provide a brief explanation (i.e., Doctorate of Ministry, or PhD study):

I am currently or seeking to be a pastor      Yes      No

I surrendered to God’s call to the pastorate before the age of 25      Yes      No

What term will you begin?

Anticipated graduation date:

I have completed a one-page testimony detailing the call of God on my life      Yes      No  
***Please include a copy of your one-page testimony with this application.***

I have a letter of recommendation from the pastor of my local church and/or other appropriate leadership giving endorsement to my call to preach the Word of God      Yes      No  
***Please include a copy of the letter with this application.***

How long have you been a resident of Alaska?

***Please attach proof of residency such as Permanent Fund Dividend documentation, voter registration or Driver’s License.***

Are you a member in good standing of a local Southern Baptist Church?      Yes      No  
***Please attach Church Endorsement Form.***

Name of your church:

I understand the scholarship can be awarded over several years and for the duration of the scholarship I will comply with all requirements. I further testify that if my circumstances change so I am no longer in compliance with the terms of the scholarship, I will notify the Alaska Baptist Foundation (ABF) immediately. I understand that failure to do so may result in my financial responsibility to the ABF for any ill-gotten scholarship funding on my behalf.

Signature:

Date: