



**ST. JOHN MISSIONARY BAPTIST CHURCH
LOVIE C. WOODS MEMORIAL EDUCATIONAL
SCHOLARSHIP
405 E. 4TH STREET | ALTON, IL 62002**

SCHOLARSHIP APPLICATION

First Name _____ Last Name _____ Middle Initial _____

Home Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ E-Mail _____

Date of Birth _____ Age _____ Male _____ Female _____

Name of Parent or Guardian _____ Name of Parent or Guardian _____

Name of High School _____

High School Address

High School City

High School Phone
Number

High School Contact Name _____ Contact Phone _____

Grade Point Average _____ Class Ranking _____ out of _____

List of school activities:

1. _____

2. _____

3. _____



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Listing of Community Service Work:

Organization's Name: _____ Contact Person: _____

Program / Project Title: _____

Service work timeframe: One Day: Or Multiple Days: Or Ongoing:

Service work was performed in what City and State? _____

How many hours-of-service work completed _____

Listing of Community Service Work:

Organization's Name: _____ Contact Person: _____

Program / Project Title: _____

Service work timeframe: One Day: Or Multiple Days: Or Ongoing:

Service work was performed in what City and State? _____

How many hours-of-service work completed _____

College Information:

College Attending	Start Date	Expected Major	Minor
Total annual cost of tuition / fees / books	\$	Total annual cost for campus-based housing / meal plan	\$

Education Financial Assistance:

Personal Amount: \$ _____



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Other Scholarship(s) Amount: \$ _____

Grants Amount: \$ _____

Student Loan(s): \$ _____

Federal Work Study Amount: \$ _____

Other Financial Resources Amount: \$ _____

Total Amount: \$ _____



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The committee awards scholarships based on a comprehensive process. Areas that are reviewed by the committee include but are not limited to the following: Academic Accomplishments, Community Service, References, Personal Essay, and Financial Need.

Applicants must **be 2025 high school graduates** entering a two year or four-year college or university. The \$500.00 scholarship will be awarded to the college, in the students' name, for payment of tuition and fees.

For scholarship consideration, please submit the following:

1. Completed scholarship application
2. A 400-word essay (typed and double-spaced), which includes:
 - Your career goals
 - Why that goal was chosen
 - The type of activities in which you have been involved to support and achieve your career goal.
3. Two letters of reference from teachers or school counselors
4. A sealed official copy of your high school transcripts

The completed application packet must be received by **Saturday, August 9, 2025**, and should be mailed to:

**SJMBC
Lovie C. Woods Memorial Educational Scholarship
405 E. 4th Street
Alton, IL 62002**