

# FLORIDA EAST COAST BAPTIST ASSOCIATION, INC.

PASTOR TOBY T. PHILPART, MODERATOR



## FLORIDA EAST COAST BAPTIST ASSOCIATION, INC. SCHOLARSHIP APPLICATION

**APPLICATION DEADLINE: AUGUST 31, 2025**

*ALL APPLICATIONS MUST BE POSTMARKED AND MAILED TO  
OFFICE OF FLORIDA EAST COAST BAPTIST ASSOCIATION, INC.*

*ATTN: SCHOLARSHIP COMMITTEE,*

*P.O. Box 740447, BOYNTON BEACH, FL 33474-0447*

*HAND DELIVERED, LATE OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.*

*“A Call to do Greater Work”*

# FLORIDA EAST COAST BAPTIST ASSOCIATION, INC.

PASTOR TOBY T. PHILPART, MODERATOR

## Eligibility and Application Requirements

Graduating high school senior

A member of an active FECBA, Inc. Church, that is also in good financial standing with the Association

A **fulltime** undergraduate student by the **Fall** semester.

Complete and sign Scholarship Application

Cumulative GPA of at least 2.5 on a 4.0 scale.

Ministry Verification Form and FECBA, Inc. Participation Form. (Complete as to applicant's participation in 2024 and 2025).

Two (2) letters of recommendations from a FECBA, Inc. Church ministry leader, high school teacher, or employer.

A copy of your College Acceptance Letter and Schedule of courses

A **typed** essay double-spaced, 500 words or more on no more than (2) pages.

10. Official high school transcript with a raised seal and received in a sealed envelope. **No photocopies accepted!**

**All of the above requirements must be met in order to be eligible to receive scholarship funds.**

## **Evaluation Criteria**

**All Scholarships will be awarded on the basis of:**

1. **Written** essay must be submitted as typewritten page(s) and the following will be examined:
  - a. **Content (Address Theme)**
  - b. **Organization (style, structure)**
  - c. **Word Usage, Punctuation, Mechanics, Spelling**
2. Cumulative grade point average (2.5 and above on a 4.0 point scale).
3. Participation in at least one of the ministries of your local church.
4. Participation in FECBA, Inc. youth activities (events).
5. Two letters of recommendation.

**All recipients must present valid proof of enrollment as a full-time college student before funds are released.**

# FLORIDA EAST COAST BAPTIST ASSOCIATION, INC.

## SCHOLARSHIP APPLICATION

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

**Section I. GENERAL INFORMATION:**

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
  LAST  FIRST  MI

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
  YEAR  MONTH  DAY

Home Address: \_\_\_\_\_ / \_\_\_\_\_  
  STREET NUMBER AND NAME  APT.

City:\_\_\_\_\_ State:\_\_\_\_\_ Zip Code:\_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

Student's Cell Phone Number: \_\_\_\_\_

Student's Email address: \_\_\_\_\_

Name of Parents/Guardians: \_\_\_\_\_

Name and Mailing Address of Member Church and Pastor's Name:: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section II. EDUCATION BACKGROUND:**

*Please provide the complete name and address of the college/university that you plan to attend or are currently attending.*

Name of Institution: \_\_\_\_\_

Address of Institution: \_\_\_\_\_

City:\_\_\_\_\_ State:\_\_\_\_\_ Zip Code:\_\_\_\_\_

*Indicate your class standing for the upcoming year.*

Freshman  Sophomore  Junior  Senior

What is your major/minor: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_ Anticipated graduation date: \_\_\_\_\_

**Section III. SCHOLASTIC ACHIEVEMENTS:**

*List any scholastic honors/awards received during the past academic school year.*

1. \_\_\_\_\_ Date: \_\_\_\_\_
2. \_\_\_\_\_ Date: \_\_\_\_\_
3. \_\_\_\_\_ Date: \_\_\_\_\_
4. \_\_\_\_\_ Date: \_\_\_\_\_
5. \_\_\_\_\_ Date: \_\_\_\_\_
6. \_\_\_\_\_ Date: \_\_\_\_\_

**Section IV. CHURCH AND FECBA, INC. PARTICIPATION:**

*Please list all church ministries/FECBA, Inc. activities and events in which you were an active participant during the past twenty-four (24) months.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**Section V. VOLUNTEER/WORK EXPERIENCE:**

*Please list volunteer community service organizations or work experience during the past twenty-four (24) months.*

**Organization Name:**

**Position:**

**Dates:**

1. \_\_\_\_\_

2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## **Section VI. ESSAY:**

***Please type a well organized essay answering the following question:***

*What do you believe are the three (3) most important principles of Christian life and how do you implement them in your life?*

Your essay should cite personal examples of your participation in church sponsored events, academic and Christian education programs, ministries, etc. to support your answer. Essays will be evaluated according to the following: *content, organization, word usage, punctuation, mechanics, spelling and clarity.*

**Essays must be typed, double spaced, 500 or more words and no more than two pages. Please use a separate sheet of paper, include your name on all pages of the essay and attach it to the application.**

I hereby certify that all information provided in my application is true and correct. The Scholarship Committee may contact any of the above institutions and organizations for verification. I have submitted the required materials as indicated above as part of my scholarship application. I understand that my application may not be considered if all required material is not present.

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SIGNATURE OF APPLICANT

DATE

**It is strongly suggested that applications be submitted to the Moderator's Office via Certified Mail, Return Receipt Requested, or by an equivalent method of delivery. Please retain a copy of your completed application prior to mailing and retain your receipt confirming delivery.**

**For further assistance or if you have any questions or concerns, please call or email one of the following:**

**Sis. Angelia Shellman (Chair) (954) 604-8527 (ashellman@ hotmail.com)**

**Reverend Dr. Howard B. Barr, Jr. (561) 293-6373 (revhbbarr@aol.com)**

**Sis. Johnetta Colson (561) 789-2026 (jgizellc@bellsouth.net)**

**Sis. Deanne Taylor (954) 873-0922 (Deanneltaylor58@gmail.com)**

**Sis. Gwendolyn Parker Price (561) 596-9065 (gwendolynparker22@yahoo.com)**

**FLORIDA EAST COAST BAPTIST ASSOCIATION, INC.**  
**PASTOR TOBY T. PHILPART, MODERATOR**

**Scholarship Application**  
**MINISTRY VERIFICATION FORM**  
**(Complete as to applicant's participation in 2024 and 2025)**

To whom it may concern:

A Florida East Coast Baptist Association, Inc. high school senior who is applying for a scholarship from the FECBA, Inc. Scholarship Fund has asked you to fill out this form. Documented participation in church ministry is an important criterion in the selection process for this scholarship. Please provide the information requested below, sign and date the form, and return it to the applicant in a sealed envelope. Thank you for your support of this student and your participation.

Student's Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
LAST FIRST MI

Ministry: \_\_\_\_\_

Level of participation:

Regular  Sporadic  Superior

Please Explain how the applicant participates:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
PRINT NAME SIGNATURE

\_\_\_\_\_  
DATE

**FLORIDA EAST COAST BAPTIST ASSOCIATION, INC.**  
**PASTOR TOBY T. PHILPART, MODERATOR**

**Scholarship Application**  
**FECBA, INC. PARTICIPATION FORM**  
**(Complete as to applicant's participation in 2024 and 2025)**

**THIS FORM MUST BE COMPLETED AND SIGNED BY ONE OF THE FOLLOWING:  
PASTOR/YOUTH PASTOR/YOUTH DIRECTOR/YOUTH LEADER.**

To whom it may concern:

A Florida East Coast Baptist Association, Inc. high school senior who is applying for a scholarship from the FECBA, Inc. Scholarship Fund has asked you to fill out this form. Documented participation in an Auxiliary of the Florida East Coast Baptist Association, Inc. is an important criterion in the selection process for this scholarship. Please provide the information requested below, sign and date the form, and return it to the applicant in a sealed envelope. Thank you for your support of this student and your participation.

Student's Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
LAST FIRST MI

Ministry: *(Check all that applies:)*

Union/Fellowship  Association  Youth Conference  Congress of Christian Education

Level of participation:

Regular  Sporadic  Superior

Please Explain how the applicant participates:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
PRINT NAME SIGNATURE

\_\_\_\_\_  
DATE



**FLORIDA EAST COAST BAPTIST ASSOCIATION, INC.**  
**PASTOR TOBY T. PHILPART, MODERATOR**

**Scholarship Application**  
**LETTER OF RECOMMENDATION**

Scholarship Applicant's Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
LAST FIRST MI

Name of person completing this recommendation: \_\_\_\_\_

To whom it may concern:

You have been asked to provide a letter of recommendation for a member of the Florida East Coast Baptist Association, Inc. who is applying for a scholarship. Scholarships are awarded based on a combination of the student's essay, academic achievement, work experience and or volunteer service and church involvement. We ask that your recommendation focus on what you know about the student's ability to succeed in his/her field of study, and contributions that they have made to your company, organization, academic environment, or ministry.

Please attach this form to your letter of recommendation. You can mail your recommendation to the address below or give it directly to the scholarship applicant. If you give the letter to the student, please **sign your name** across the flap of the **sealed envelope**. **If you mail the letter it must be postmarked no later than August 31, 2025 in order for the student's application to be complete and remain eligible for scholarship consideration.**

Florida East Coast Baptist Association, Inc.  
Attention: Scholarship Committee  
P.O. Box 740447  
Boynton Beach, FL 33474-0447

*Thank you for your support of this student and your participation in the process.*

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Scholarship Applicant's Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
LAST FIRST MI

Name of person completing this recommendation: \_\_\_\_\_

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**APPLICATION CHECKLIST**

Thank you for applying for the FECBA, Inc. Scholarship offered by the Florida East Coast Baptist Association, Inc. Failure to submit all required materials by **August 31, 2025** will make your application ineligible for further consideration.

Please review this **checklist** and make certain that all required materials have been submitted. These materials included:

- Completed and signed application
- Official copy of current high school transcript
- Typed essay
- Ministry Verification Form and FECBA, Inc. Participation Form
- Two (2) letters of recommendation
- Copy of College Acceptance Letter and Schedule of courses