

TEMPLE OF DELIVERANCE CHURCH OF GOD IN CHRIST
369 G.E. Patterson Avenue
Memphis, Tennessee 38126

BISHOP MILTON R. HAWKINS, SENIOR PASTOR
BISHOP G. E. PATTERSON, FOUNDER

2020 EDUCATION DAY | INFORMATION FORM

PLEASE SUBMIT HEADSHOT PHOTO WITH COMPLETED FORM

I. BASIC INFORMATION

Please print or type:

Church Membership Number _____

Full Name _____
First Middle Last

Email _____

Current Mailing Address _____
Street

Current Mailing Address _____
City State Zip Code

Home Phone Number _____ Alternate Phone Number _____

II. ACADEMIC INFORMATION

Estimated current cumulative grade point average (GPA):

High School GPA _____ College GPA _____

Name of Institute graduated _____

Date of completion _____

Expected College Major _____

Name of College plan to attend _____

Categories: [Graduate since July 2019]

- High School
- Associate Degree
- Undergraduate College Degree
- Graduate or Professional Degree
- Vocational/Technical Certificate
- Post Graduate Certificate
- Special Award _____
- Other _____

Church Activities/Ministries: Check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Youth Choir | <input type="checkbox"/> Youth Usher |
| <input type="checkbox"/> Mass Choir | <input type="checkbox"/> Youth Greeters |
| <input type="checkbox"/> Sunday School | <input type="checkbox"/> Church Orchestra |
| <input type="checkbox"/> Bible Study | <input type="checkbox"/> Telephone Ministry |
| <input type="checkbox"/> Birth Month | <input type="checkbox"/> Family Life Center Volunteer |
| <input type="checkbox"/> Fine Arts Department | <input type="checkbox"/> Hospitality Committee |

Other _____

Other _____

I hereby certify that the information submitted on this form is, to the best of my knowledge, true and correct.

Applicant's Signature

Date

DEADLINE: June 23, 2020

Return Completed Form and Photo to:

email: 2020scholarshipcommittee@gmail.com

or

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369 G.E. Patterson Avenue
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Deacon David Johnson, Education Day Chairperson