



A. Earl Potts Scholarship of the Alabama Baptist State Convention

The scholarship is named in honor of A. Earl Potts, former executive director of the State Board of Missions (1984-1990). **Requirements:**

1. To be eligible, a student **must** be
 - an entering first-time freshman
 - **an active member of a cooperating Alabama Baptist State Convention church***
 - accepted as a full-time student by one of our Baptist schools
 - recommended by his or her pastor
2. This scholarship is **not** available to
 - recipients of Board of Aid for Students in Church-Related Vocations scholarships, which provides generous assistance to students preparing for a Christian vocation
 - dependents of ordained ministers serving in the Alabama Baptist State Convention
 - dependents of full-time employees of our Baptist schools
 - students with full-tuition scholarships
3. The Executive Office of the State Board of Missions must receive all applications by **October 12** for fall semester and **March 12** for spring semester.
4. The financial aid officer of each institution will send completed applications of those who qualify for awards to the Executive Office of the State Board of Missions, and in turn the student will be notified of the award.
5. When the school certifies to the Alabama Baptist Convention that the student has been admitted, a certificate for this scholarship will be mailed to the pastor at the church address. The pastor will present the certificate to the student.
6. One half of the scholarship will be granted at the beginning of each of two semesters.
7. The scholarships will be awarded in the order in which applications are received and approved.

I HEREBY APPLY FOR AN A. Earl Potts Scholarship from the Alabama Baptist State Convention in the amount of \$2,150.00 for the freshman academic year. (\$1,075.00 for the Fall semester – \$1,075.00 for the Spring semester). I have applied for admission as an entering first-time freshman where I will begin in Fall 20____ Spring 20____.

Applicant's Name _____ Student ID or SS No. _____

Address _____ City _____ ST _____ Zip _____

Career Goal (Undecided not acceptable) _____

Occupation of Parent/Guardian: _____

Signature of Student _____

Signature of Parent/Guardian _____

UPON COMPLETION MAIL TO
Office of Financial Aid
5735 College Parkway
Mobile, AL 36613-2842

Pastoral Certification: I certify that the above student is an active member of the _____ Baptist Church located in _____, AL which is cooperating with the Alabama Baptist State Convention of the Southern Baptist Convention in the _____ Association. I recommend that this student receive this scholarship.

Name of Pastor _____

Church Mailing Address _____ City _____ State _____ Zip _____

Signature of Pastor _____

***A cooperating Alabama Baptist church is one that supports the mission of the State Convention and gives faithfully through the Cooperative Program. Additionally, we encourage churches to submit an Annual Church Profile report to the Alabama Baptist State Board of Missions for the purposes of helping our family of churches to measure effectiveness in Great Commission ministries.**