



**YOLANDA KYLES STRICKLAND  
SERVICE AWARD**

**APPLICATION**

United Baptist Church  
2930 Highway 468  
Pearl, Mississippi 39208

Pastor Rev. Dr. Jonathan T. Phillips, Jr.  
601-664-3800

Email: [unitedmbchurch@bellsouth.net](mailto:unitedmbchurch@bellsouth.net)  
website: [www.unitedbaptistms.org](http://www.unitedbaptistms.org)



# United Baptist Church

BUILDING MAN, ADVANCING THE KINGDOM

“Instruction ends in the schoolroom, but education ends only with life.”

Fredrick W. Robertson

United Baptist Church supports education and believes it is a lifelong learning process that prepares individuals in becoming independent, successful professionals. In doing so, we offer you the Yolanda Kyles Strickland Service Award to share in the enhancement of education and with individual youth in the community.

The following information must be provided to process your Service Award application:

- GPA of at least 3.0  
(provide official transcript)
- Application (see attached)
- Provide 2 references (see attached forms)  
1 personal (i.e. pastor, friend)  
1 professional (i.e. teacher, counselor, employer)
- Written essay of at least 300 words (see attached form)
- College Acceptance Letter
- Activities Chart (see attached)

Please return completed application to:

United Baptist Church  
c/o Annie Adams  
2930 Highway 468  
Pearl MS 39208

You may also return application by email, [unitedmbchurch@bellsouth.net](mailto:unitedmbchurch@bellsouth.net)

Application packet must be postmarked or emailed by April 20, 2018.

Service Award Recipient will be named and recognized at the Orey-Spann Scholarship Banquet on Saturday, May 19, 2018. Recipient must be present. The award in the amount of \$500.00 (five hundred dollars) will be forwarded to the school that you will be attending in the summer/fall semester.



# United Baptist Church

BUILDING MAN, ADVANCING THE KINGDOM

## Yolanda Kyles Strickland Service Award Application

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

High School you are attending \_\_\_\_\_

Graduation date \_\_\_\_\_

Circle the term and year you expect to start at your college/university choice:

Summer                  Fall                  Year \_\_\_\_\_

Cumulative High School GPA \_\_\_\_\_

Please write a statement discussing your educational and career goals:

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Please describe why receiving a scholarship is important to you:

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Signature \_\_\_\_\_ Date \_\_\_\_\_



# ACTIVITIES CHART

Name \_\_\_\_\_

	<b>Dates From -To</b>	<b>Total Hours Spent Per Month</b>	<b>Responsibility/ Accomplishments</b>
<b>School/Family/ Community Activities</b>			
<b>Volunteer Service</b>			
<b>Work for Pay</b>			

Photocopy and attach additional sheets if necessary



# Scholarship Recommendation

## TO BE COMPLETED BY STUDENT:

Name \_\_\_\_\_

Address \_\_\_\_\_

This completed form is due by \_\_\_\_\_ Please return by \_\_\_\_\_

## TO BE COMPLETED BY PERSON MAKING RECOMMENDATION:

Length of time you have known applicant: Years \_\_\_\_\_ Months \_\_\_\_\_

In what capacity do you know applicant (i.e. teacher, advisor, employer, etc.)? \_\_\_\_\_

We are seeking information about qualities related to the applicant's potential for success in the career world. Please rate the candidate below and make any additional comments you desire.

Check Appropriate column for each item below	Superior	Above Average	Average	Fair	Poor	Unable to Judge
Ability to Present Ideas						
Work Habits						
Leadership						
Enthusiasm						
Cooperation						
Resourcefulness						
Initiative						
Dependability						
Adaptability						
Potential for Success						

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Recommendation Completed by:

\_\_\_\_\_  
Name Signature Date

\_\_\_\_\_  
Title Employer

Please return this form with you completed application.



# Scholarship Recommendation

**TO BE COMPLETED BY STUDENT:**

Name \_\_\_\_\_

Address \_\_\_\_\_

This completed form is due by \_\_\_\_\_ Please return by \_\_\_\_\_

**TO BE COMPLETED BY PERSON MAKING RECOMMENDATION:**

Length of time you have known applicant: Years \_\_\_\_\_ Months \_\_\_\_\_

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Dependability						
Adaptability						
Potential for Success						

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Recommendation Completed by:

\_\_\_\_\_  
 Name Signature Date

\_\_\_\_\_  
 Title Employer

Please return this form with you completed application.

