

***Morris Dabney King and Norma Hatot-King
Scholarship Application***

Please type or print legibly

Full name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Age: _____ Date of Birth: _____

Email address: _____

Phone #: () _____ Alternate phone #: () _____

Parent/Guardian: _____ Phone # () _____

Name of high school: _____

Date of Completion: _____ GPA: _____
(Please provide an official high school transcript.)

College or Vocational School Planning to attend: _____

Have you been accepted? _____

If not, when do you expect to hear? _____

School Location: _____

To be considered for a scholarship, application and required information
must be submitted no later than **MAY 3, 2024** to:

Morris Dabney King and Norma Hatot-King Scholarship
Shiloh Baptist Church (Old Site)
801 Sophia Street
Fredericksburg, VA 22401

Or by email to: secretary@shiloholdsite.org