



# The Baptist College of Florida est. 1943

"Changing the World Through the Unchanging Word®"

## BCF HOUSING SCHOLARSHIP APPLICATION 2020-2021

**INSTRUCTIONS: Fill out front of application only.**

**Name:** \_\_\_\_\_ ID \_\_\_\_\_  
Last First

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Permanent Home Address:** \_\_\_\_\_  
Street Address City State Zip

**Address While In School:** \_\_\_\_\_  
Street Address City State Zip

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Student Classification:**  Returning Student  New Student  Transfer Student

**Current College Level:**  Freshman  Sophomore  Junior  Senior  Graduate

**Housing Type:**  Dormitory  Married Housing

**Additional Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

By signing this certification statement, I certify that all information on this application for financial assistance is complete and correct.

I authorize BCF to apply the Housing Scholarship to my cost of student housing while attending The Baptist College of Florida.

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

**Please return completed application to:**  
The Baptist College of Florida, Office of Financial Aid • 5400 College Drive, Graceville, FL 32440  
Phone: (850) 263-3261 or (800) 328-2660 ext. 470

**\*\*\*For Office Use Only\*\*\***

**Account Balance:** \$ \_\_\_\_\_

**GPA:** \_\_\_\_\_

**Eligible for loans?**  Yes  No

**Applied for loans?**  Yes  No

**Amount paid out of pocket:** \$ \_\_\_\_\_

**Comments:**

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