

Buddy Scholarship Application

\$1,000 credit per student
for current family

+

\$1,000 credit per student
for new family



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THIS FORM MUST BE SUBMITTED WITHIN 5 DAYS OF THE NEW STUDENT(S) ENROLLMENT DATE.

____/____/____
DATE RECEIVED

This section should be completed by the family referring a student(s) to Peoples Baptist Academy.

CURRENT FAMILY

LAST NAME OF PERSON RESPONSIBLE FOR THE ACCOUNT FIRST NAME MIDDLE INITIAL

STREET ADDRESS CITY STATE COUNTY ZIP CODE

We wish to apply for the \$1,000 credit offered for each student referred.
A \$1,000 credit per student will be awarded in increments of \$100 per month, August through May.

SIGNATURE _____
DATE

Please note: If a referred student enrolls after the school year begins or withdraws prior to the end of the school year, this credit will be reduced based on the number of months that the student(s) attended PBA.

Approved by _____ Date ____/____/____ Total Amount Awarded \$ _____

Declined by _____ Date ____/____/____ Reason _____

This section should be completed by the new family referred to Peoples Baptist Academy.

NEW FAMILY

PARENT'S LAST NAME FIRST NAME MIDDLE INITIAL

STREET ADDRESS CITY STATE COUNTY ZIP CODE

We wish to apply for the \$1,000 credit offered for each student enrolling.
A \$1,000 credit per student will be awarded in increments of \$100 per month, August through May.

We were referred to Peoples Baptist Academy by the family listed above and have enrolled the following students:

STUDENT NAME GRADE DATE STARTED

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STUDENT NAME GRADE DATE STARTED

STUDENT NAME GRADE DATE STARTED

SIGNATURE _____
DATE

Approved by _____ Date ____/____/____ Total Amount Awarded \$ _____

Declined by _____ Date ____/____/____ Reason _____