



SCHOLARSHIP RECOMMENDATION FORM

Student Info

Name _____ School Year (e.g. 2013-14) _____
City _____ State _____

Scholarship Info

Appalachian Bible College offers a \$2,000 "Friend of ABC" scholarship to eligible students who receive written recommendation. Provision of scholarship to the student is dependent on student eligibility and fund availability. This form does not provide any guarantee of funds.

Please identify your association to ABC:

___ABC Alumni Association Member ___ABC Ladies Auxiliary Member
___Pastor of Supporting Church ___High School Principal
___ABC Board of Directors

Your Name _____

Church/School Name (if applicable) _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

In a sentence or two, tell us why you are recommending this person.

Send this form to:

Financial Aid Office
Appalachian Bible College
161 College Dr.
Mount Hope, WV 25880

OR

E-Mail:
financialaid@abc.edu

OR

Fax:
304-461-0627