

**SECOND BAPTIST CHURCH GRADUATES' RECOGNITION DAY – SUNDAY, JUNE 14**

**REGISTRATION FORM (to be included in program)**

**Deadline to return form: Thursday, April 23, 2026**

**PLEASE ATTACH PHOTO FOR INCUSION IN PROGRAM**

*(Fillable form)*

Full Name \_\_\_\_\_

First

Middle

Last

Parent(s)/Guardian(s) Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Student or Parent Email: \_\_\_\_\_

**Graduation Level**     Pre-Sch/K     Elementary     Middle School     High School  
(Check appropriate box)     Associate's Degree     Bachelor's Degree     Master's Degree     Doctoral Degree

**Pre-School, Elementary or Middle School Graduate:**

What would you like to do (career) when you are older? \_\_\_\_\_

**High School Graduate: (Please attach headshot photo)**

High School Graduation From: \_\_\_\_\_

Honors/ Awards \_\_\_\_\_

Future plans/goals: (Include college attending/major and/or career plans after graduation.) \_\_\_\_\_

What scripture or quote gives you inspiration? \_\_\_\_\_

**Vocational/College/Post Graduate Level:** (Check one)    **(Please attach headshot photo)**

Degree Earned:     AA     BA     BS     MA     MBA     M.Ed.     Ed. D     Ph.D.

Name of College/University \_\_\_\_\_

Major / Area of Concentration \_\_\_\_\_

Future plans / career goals \_\_\_\_\_

What scripture or quote gives you inspiration? \_\_\_\_\_

If you would like to invite a special teacher or school official to Graduates' Recognition Day, please list their name and mailing address \_\_\_\_\_

Questions, email [sbcscholarshipcommission@gmail.com](mailto:sbcscholarshipcommission@gmail.com) or text Kathy Jackson @626-676-0465.

Return completed form to [sbcscholarshipcommission@gmail.com](mailto:sbcscholarshipcommission@gmail.com)

**Or return to Second Baptist Church Office by deadline, Thursday, April 23, 2026**