

**Majority Missionary Baptist Church**  
**Baccalaureate Recognition Form**

**Please Print Legibly**

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

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

Email Address: \_\_\_\_\_

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

Level completed (select one): High School: \_\_\_\_\_ College: \_\_\_\_\_ Graduate: \_\_\_\_\_

School's Name: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

Degree Received \_\_\_\_\_

Honors or Recognition Received \_\_\_\_\_

\_\_\_\_\_

If High School graduate, are you planning to attend college/tech? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes what school \_\_\_\_\_

Location of school: \_\_\_\_\_ Major/Concentration \_\_\_\_\_

If you are planning to join the Military, what Branch: \_\_\_\_\_

\*\*Please return this fully completed form to Majority Missionary Baptist Church 414 North Coit Street,  
Florence, SC, USA P.O. Box 2023 or email to [majoritymmbc414@gmail.com](mailto:majoritymmbc414@gmail.com).