



Miss Teen Bahamas Scholar  
Making A Difference, One Queen At A Time

Phone: 242-525-4884

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APPLICATION

Form fields for personal information: FIRST NAME, M. I., LAST NAME, DATE OF BIRTH (MM/DD/YYYY), AGE, STREET ADDRESS/P. O. BOX, EMAIL ADDRESS, TELEPHONE CONTACT(S), MOTHER'S NAME, TELEPHONE CONTACT(S), FATHER'S NAME, TELEPHONE CONTACT(S), SCHOOL, GRADE, G. P. A., PRINCIPAL'S NAME, CAREER ASPIRATION

If you were accepted as a contestant, what would be your platform? \_\_\_\_\_

Clubs: \_\_\_\_\_

Community Service: \_\_\_\_\_

Do you have any medical conditions/issues?  Yes  No

Have you ever been charged with a crime?  Yes  No

Has there been any extreme disciplinary action taken against you at home or otherwise?  Yes  No

If you are accepted into our Miss Teen Bahamas Scholar Program, we would need the following:

- 1. A copy of the first 2 pages of your Bahamian passport
- 2. Two (2) letters of reference from either a teacher, Guidance Counselor or former employer (if worked during the summer)