



400 San Juan Drive, Ponte Vedra Beach, FL 32082  
2002 San Pablo Road, Jacksonville, FL 32224  
904-285-6127

**CHRIST EPISCOPAL CHURCH CHARITABLE  
FOUNDATION EDUCATIONAL GRANT APPLICATION  
FOR COLLEGE STUDENT**

[Type text]

## **Guidelines**

### **Christ Episcopal Church Charitable Foundation Educational Grant**

#### **THIS IS A NEED-BASED GRANT**

##### **Purpose**

The purpose of the Educational Grant is to enable a high school or college student to attend the College or University of his/her choice when personal and family financial conditions would otherwise prevent them from doing so.

Please note that, in general preference will be given to students who are attending public schools within the State of Florida College & University system.

Students should:

- live in the Beaches community or be an active member of Christ Episcopal Church.
- have achieved excellence in their academic, community and spiritual lives.
- not qualify for a Christ Episcopal Church Foundation four-year tuition scholarship.

##### **Grant Procedure**

The student must complete and submit a grant application and other required forms, on or before March 1 of each year. The Foundation's Scholarship Committee will review the applications and select from among them, if any, those to receive educational grants based on the students' achievements, aspirations and financial need.

##### **Amount of Grant and Duration**

The Scholarship Committee will determine the amount of each grant.

##### **Reapplication of Grants**

Students may reapply by March 1 providing updated information on their grades, financial situation, etc. No request for renewal of grants will be considered without an official transcript of grades from the college or university and the most recent IRS Form 1040 from the student's parent(s) or legal guardian(s). A student's ongoing financial need and academic performance will be key criteria. One or more members of the Committee may interview applicants and make recommendations to the Committee.

##### **Payment of Grants**

Payments of all grants will be made to the college or university which the applicant plans to attend, or in which the applicant is enrolled, and designated to be applied to the applicant's account for college-related expenses.

##### **Application**

**The following documents must be submitted to the Christ Episcopal Church Charitable Foundation by March 1 to qualify:**

- A form completed by applicant's parent(s) or legal guardian(s), including most recent IRS tax form 1040, FAFSA worksheet and most recent Florida 529 Savings Plan statement, if applicable. (Please black out SSNs).
- Official college transcripts.

##### **Submittals**

Please return the completed Grant Application and all documents requested **on or before March 01**, to the following:

[Type text]

Casey Slone  
Christ Episcopal Church  
400 San Juan Drive  
Ponte Vedra Beach, FL 32082

Revised: February 2017

[Type text]

**CHRIST EPISCOPAL CHURCH CHARITABLE FOUNDATION  
EDUCATIONAL GRANT**

(To be completed by a College/ University Applicant)

Date: \_\_\_\_\_

Name: \_\_\_\_\_ e-mail: \_\_\_\_\_

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

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

College / University: \_\_\_\_\_

College email: \_\_\_\_\_

**A. Please attach a typed essay providing answers to the following questions:**

1. Describe your aspirations, goals, activities.
2. Describe the way in which you maintain or enhance your physical, mental and spiritual well-being.
3. How do you demonstrate your responsibility to the community?
4. Explain why you need this grant to help with your college / university expenses?

**B. Financial Considerations**

1. Cost of Attendance at the above institution:

Tuition & fees	_____
Room	_____
Meals	_____
Books & Supplies	_____
Transportation	_____
Miscellaneous	_____

**Total** \_ \_ \_ \_ \_

2. Sources of Funds to pay costs of attendance

<u>Source</u>	<u>Amount</u>	<u>Applied for / Awaiting Decision</u>
Bright Futures	_____	_____
Pell Grant	_____	_____
Florida 529 Plan funds	_____	_____
Academic Grants / Scholarships	_____	_____
Athletic Grants/ Scholarships	_____	_____
Federal Direct Subsidized Loan	_____	_____
Federal Direct Unsubsidized Loan	_____	_____
Family Contribution	_____	_____
Other Grants / Scholarships (cite source and amount)	_____	_____
_____	_____	_____
Part-time job (describe and monthly amount)	_____	_____
_____	_____	_____
Other sources (describe and amount)	_____	_____
_____	_____	_____

**Total** \_\_\_\_\_

Signature: \_\_\_\_\_

[Type text]

**CHRIST EPISCOPAL CHURCH CHARITABLE  
FOUNDATION EDUCATIONAL GRANT**

(To be filled out by parent(s) or legal guardian(s))

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Combined annual household income \$ \_\_\_\_\_

*(Please provide IRS form 1040 from previous year tax returns. Application will not be considered without this document) If parents are divorced or separated both must provide a 1040.*

Other siblings in the family and age, excluding applicant: \_\_\_\_\_

How many children in the family are currently attending college? \_\_\_\_\_

If other children are currently in college, how are these expenses funded?

\_\_\_\_\_  
\_\_\_\_\_

Please describe any special family situations that are relevant to your financial situation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that this information is accurate and I understand that the information contained in this application will only be shared with the Scholarship Committee of the Christ Episcopal Church Foundation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name