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CHRIST EPISCOPAL CHURCH CHARITABLE FOUNDATION SCHOLARSHIP GUIDELINES AND APPLICATION

Building Our Lives of Discipleship
www.christepiscopalchurch.org

**GUIDELINES
CHRIST EPISCOPAL CHURCH CHARITABLE FOUNDATION SCHOLARSHIP**

THIS IS A NEED-BASED SCHOLARSHIP

Purpose: To assist graduating high school seniors, who have financial hardships, obtain a four-year degree from an accredited public institution of higher learning within the State of Florida College and University System.

Scholarship Type: The 4-year Florida University Plan (see MyFloridaPrepaid.com) covers tuition differential fee and other specified fees at a State University for 120 credit hours.

Eligibility:

- A student graduating from a high school within the Beaches community or active Christ Church members graduating from a high school outside the beaches community who would be financially unable to attend college or university full-time without this scholarship.
- At least one year's residence in the State of Florida.
- An excellent high school academic record, possess unusual promise, and qualifies for acceptance by the college or university of choice within the state of Florida college and university system by the date of interview.
- Demonstrated involvement in extra-curricular activities in church, school and community.
- Students with a full Florida prepaid scholarship will not be considered.

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 form 1040, FAFSA worksheet and most recent 529 savings plan statement, if applicable (please black out SSN's).
- A form completed by applicant outlining aspirations, goals, extra-curricular activities and details of financial need.
- A form completed by the applicant's guidance counselor.
- A form completed by the applicant's clergy or spiritual advisor.
- At least one letter of recommendation by a high school teacher.
- School transcripts for the 11th and 12th grades up to the date of application, including SAT/ACT test scores.
- Evidence of acceptance as a full-time student at an accredited public institution of higher learning within the State of Florida College and University System.
- A copy of any email, letter or notice from Bright Futures, FAFSA and the college or university you plan to attend regarding financial aid, a monetary award, scholarship or grant.

Submittals:

- Please return the completed scholarship application and all documents requested to the applicant's Guidance Counselor.
- Applicant's Guidance Counselor must forward these materials, **on or before March 1**, to the following (or may be picked up by a member of the scholarship committee as needed):

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

Revised: November 2016

CHRIST EPISCOPAL CHURCH CHARITABLE FOUNDATION SCHOLARSHIP
(To be filled out by applicant)

DATE: _____

NAME: _____ TELEPHONE: _____

CELL: _____ EMAIL: _____

COLLEGE EMAIL IF KNOWN: _____

ADDRESS: _____

BIRTHDATE: _____ SSN: _____

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

1. Describe your aspirations, goals, activities, and how you envision them in relation to your future.
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. Please explain in detail why you are in financial need of this scholarship.

B. At what College / University will you use this scholarship? _____
Have you been accepted? Yes _____ No _____

C. Financial Considerations

1. Cost of Attendance (first year) 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>Applied for /</u>	<u>Amount</u>	<u>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:_____

(PLEASE RETURN TO APPLICANT'S GUIDANCE COUNSELOR)

CHRIST EPISCOPAL CHURCH CHARITABLE FOUNDATION SCHOLARSHIP
(To be filled out by applicant's Guidance Counselor)

DATE: _____

NAME OF APPLICANT: _____

ADDRESS OF APPLICANT: _____

The above applicant has applied for a college scholarship to be awarded by The Christ Episcopal Church Charitable Foundation. We will greatly appreciate your assessment and/or opinion regarding this applicant's standing, record, and capabilities.

Please list the following for the applicant:

- SAT: Total _____ or CR _____ M _____ W _____
- ACT
- GPA
- Class Rank

Please attach a typed response to the following requested information:

5. Please list any scholastic honors or awards as well as any extra-curricular activities at the school.
6. As this is a need based scholarship, please give any insight into the applicants' financial ability to attend college.
7. Please provide any pertinent comments or reflections from your association with this student including how long you have known the applicant.

SIGNATURE: _____ PRINTED NAME: _____

TITLE: _____ TELEPHONE: _____

EMAIL: _____

SCHOOL: _____

CHRIST EPISCOPAL CHURCH CHARITABLE FOUNDATION SCHOLARSHIP

(To be filled out by applicant's Clergy or Spiritual Advisor)

DATE: _____

NAME OF APPLICANT: _____

ADDRESS OF APPLICANT: _____

The above applicant has applied for a college scholarship to be awarded by The Christ Episcopal Church Charitable Foundation. We will greatly appreciate your assessment and/or opinion regarding this applicant.

Please attach a typed response to the following areas:

1. The applicant's spiritual outlook, activities, community involvement and relationships.
2. Any knowledge you may have about the applicant's need for financial assistance.
3. Any other comments, reflections and/or recommendations pertinent to the applicant.

SIGNATURE: _____ PRINTED NAME: _____

TITLE: _____ TELEPHONE: _____

EMAIL: _____

ADDRESS: _____

INSTITUTION: _____

(PLEASE RETURN TO APPLICANT'S GUIDANCE COUNSELOR)

CHRIST EPISCOPAL CHURCH CHARITABLE FOUNDATION SCHOLARSHIP

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

Name _____ Phone Number _____

Email _____ Cell Number _____

Address _____

Occupation _____ Employer _____

Name _____ Phone Number _____

Email _____ Cell Number _____

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