

**MARTIN LUTHER KING, JR. MEMORIAL SCHOLARSHIP FUND
of the BRONX COUNCIL, DIOCESE OF NEW YORK**

GUIDELINES FOR SCHOOL SCHOLARSHIP REQUESTS

All school scholarship requests must have the endorsement of the area IPC Chairperson and the local parish priest.

School scholarships are granted to students on the undergraduate level.

LIMITATIONS

The Committee will not entertain requests for:

- more than three [3] applicants from one parish
- more than two [2] applicants from the same family
- scholarships to children, grandchildren or other family members of active members serving on the Bronx Council, the Scholarship Fund Committee and the Scholarship Fund Screening Committee.

DEADLINES FOR REVIEW BY THE BRONX COUNCIL'S SCHOLARSHIP COMMITTEE:

- May 31 each year for June graduates; October 15 for Spring term beginning 2/1 year following. There are no priorities as to Bronx IPC area. Assistance is given based on the worthiness of the applicant and on a first-come, first-serve basis.

ONLY THE OFFICIAL APPLICATION FORM WILL BE ACCEPTED.

IPC District/Area: This means East, South, Northwest Bronx IPC areas

Parish: This means parish to which applicant belongs.

Rector: This means rector [PIC, vicar] of applicant's parish. *

Parish IPC Repr.: This means parish IPC representative from applicant's parish. Should be familiar with application so if there are any questions, answers will be readily available.

Where a parish is served by a supply priest at the time of application, the Senior Warden will be acceptable.

DESCRIPTION REQUIREMENTS

1. School applicant is presently attending.
2. School and courses for which applicant requires scholarship assistance.
3. Describe how grant will be used, [i.e. books].
4. Other sources applied to for financial assistance.
5. How much assistance received from any other source.
6. Applicant's parish church, community, extra-curricular, involvement over the years.
7. Is there an active IPC participation in the parish?
8. Work experience, if any.

MARTIN LUTHER KING, JR. MEMORIAL SCHOLARSHIP FUND
of the BRONX COUNCIL, DIOCESE OF NEW YORK
APPLICATION FOR SCHOOL SCHOLARSHIP ASSISTANCE

[please print or type]

Name of Applicant _____

Address _____

Telephone # _____

Name of Parish _____

Address _____

Telephone # _____

School presently attending _____

Address _____

Projected date of high school graduation _____

Name of accredited college, university, vocational/technical school where applicant has been
accepted. _____

address _____

Attach copy of acceptance for term registered

Scholarship requested for _____ Amount _____

Continued....

List other sources of financial assistance and amount received, i.e., Episcopal Church Women, parish, Regents, employment, etc. _____

_____ List community involvement over the years _____

List extra-curricular activities over the years _____

List work experience over the years _____

List parish involvement over the years _____

Name and phone number of parish IPC representative _____

Applicant's signature _____ Date _____

Area [East, NW Bronx, South] _____

ENDORSEMENT

Area IPC Rep. signature _____ Date _____

Parish IPC Rep. signature _____ Date _____

Rector [PIC/vicar] signature _____ Date _____

ONLY THE OFFICIAL APPLICATION WILL BE ACCEPTED.

Please send completed form and enclosures to: Interparish Secretary for approval and transmittal.