

**Diocese of Toledo and the Midwest
Metropolitan Antony Bashir Memorial Scholarship**

Purpose of the Scholarship: Scholarships are awarded to worthy and needy Orthodox youth of the Antiochian Archdiocese who have resided within the Diocese of Toledo and the Midwest for at least one year prior to awarding of the scholarship. Scholarships will be awarded to students of outstanding excellence in any field of study toward a baccalaureate degree in an accredited college or university.

Scholarship Awards:

A Board of Judges has the duty of selecting scholarship recipients on the basis of scholastic achievement, participation in religious life, need, character and worthiness. Two scholarships will be awarded based on Academics and two on Academics/Need. To be eligible to receive an Academic/Need award, the Parent Financial Summary, Section 4, must be completed.

Application must be typed or printed.

Section 1

Name _____	Date of Birth _____
Home Address _____	Telephone Number () _____
City _____	Home Parish _____
State _____ Zip _____	Parish Priest _____
Father's Name _____	Age _____
Occupation _____	Living _____ Deceased _____
Mother's Name _____	Age _____
Occupation _____	Living _____ Deceased _____

Please confirm your application includes the following as only complete applications will be considered (NO EXCEPTIONS):

1. Completed application.
2. Proof of acceptance or registration in an accredited college or university.
3. An essay, approximately 300 words stating your career goals, church and community involvement, and worthiness to receive an award.
4. Parish Priest Endorsement Form submitted by your priest.
5. High School transcript for high school applicants.
6. Current college transcript of grades bearing the official seal of the registrar for college students.

Submit applications postmarked by June 1 to:

**St. George Antiochian Orthodox Church
Attn: Scholarship Committee
1250 Oakdale Avenue
West St. Paul, MN 55118
ckaros@visi.com**

Section 2

High School name _____

Address _____

City/State _____

Principal's Name _____

Name/Location of College/University you will attend or are currently attending:

Amount of Tuition _____ Resident or Commuter _____

If Resident, note cost of room/board _____

Number of credit hours you expect to take: Summer _____ Fall _____ Spring _____

Vocation Goal _____

Honors & Awards (note year of receipt) _____

Extra-Curricular Activities (church, civic, school, social involvement) _____

List all scholarships & financial awards received.

(Specify length of time they are applicable, source of award, and amount):

Section 3 - Scholarship Pledge

During the tenure of any award given to me, I promise that I will continue to participate in the Orthodox Faith and further support its principles and activities to the best of my ability. I also understand that falsification of any part of this application will result in the requesting of a refund of the total amount of the award.

I will keep the Chairperson informed of any changes in my address, curriculum, and/or school attended, and **will forward to the Chairperson a scholastic record at the end of each school term during which I hold an award.** Finally, I will immediately report a withdrawal from school, during the award period, to the Chairperson. Upon such withdrawal, I understand that I may be liable to refund the award, subject to the discretion of the Chairperson.

Applicant's Signature _____ Date _____

Section 4 – Parent Financial Summary.

Must be completed for all applicants applying for an Academic/Need award.

1. What was your parents' adjusted gross income for the past year?

Father/Stepfather _____ Mother/Stepmother _____

2. Enter the number of dependent children including the applicant _____

3. In the 2017-2018 school year, how many children (including applicant) will be college students

4. In the 2017-2018 how many children (excluding applicant) will be in

Public School _____ Private School _____ Expenses _____

5. Are there specific instances of an individual(s) within the family who require medical or other care constituting an excessive financial burden? ___ No ___ Yes, please explain:

**Antiochian Orthodox Christian Church
Diocese of Toledo and the Midwest
Antony Bashir Memorial Scholarship**

Section 5 - To be completed by Applicant's guidance counselor or principal

Applicant's Name _____

This applicant is applying for the Antony Bashir Memorial Scholarship from the Antiochian Orthodox Diocese of Toledo and the Midwest. Scholarships are awarded to worthy and needy Orthodox youth of outstanding excellence in any field of study toward a baccalaureate degree in an accredited college or university. Thank you for your assistance in completing these questions.

Applicant's High School Graduation date _____

Applicant's grade point average _____

Total number in graduating class _____ Applicant's class rank _____

Applicant's ACT/SAT scores and dates of testing:

ACT _____ Date _____

SAT _____ Date _____

Important Note: Please include the applicant's TRANSCRIPT with this application.

Your Name _____ Official Title _____

Date _____ Name of School _____

Please mail completed application and transcript to:

**St. George Antiochian Orthodox Church
Attn: Scholarship Committee
1250 Oakdale Avenue
West St. Paul, MN 55118
ckaros@visi.com**

Must be postmarked no later than June 1 (no exceptions).

**Metropolitan Antony Bashir Memorial Scholarship
Parish Priest Endorsement Form**

	<i>Low Involvement</i>				<i>High Involvement</i>		
1. Church Attendance & Participation	NA	0	1	2	3	4	5
2. Church School Attendance	NA	0	1	2	3	4	5
3. Altar Boy	NA	0	1	2	3	4	5
4. Choir	NA	0	1	2	3	4	5
5. Sunday School Teacher	NA	0	1	2	3	4	5
6. Teen SOYO Member	NA	0	1	2	3	4	5
Teen SOYO Officer.....	NA	0	1	2	3	4	5
Active in Regional Teen SOYO	NA	0	1	2	3	4	5
Do you have an Active Teen Group? Yes/No							
7. Oratorical Participant	NA	0	1	2	3	4	5
8. Catechism Bowl Participant	NA	0	1	2	3	4	5
9. Art Festival	NA	0	1	2	3	4	5
10. Creative Writing Festival	NA	0	1	2	3	4	5
11. Poetry Festival	NA	0	1	2	3	4	5
12. Photography Festival	NA	0	1	2	3	4	5
13. Community Volunteer Work	NA	0	1	2	3	4	5

Please comment on why the applicant should receive this scholarship.

Clergy Name (print) _____ Signature _____
 Clergy Home Phone _____ Clergy Cell Phone _____

Please return by June 1 to:
St. George Antiochian Orthodox Church **Email: ckaros@visi.com**
Attn: Scholarship Committee
1250 Oakdale Avenue
West St. Paul, MN 55118

Note: This form must be returned for this applicant to be considered for a scholarship.