Church Training and Deaconess House Scholarship Fund  
The Episcopal Diocese of Pennsylvania  
23 E. Airy Street, Norristown, PA 19401

Scholarship Applicant Information

☐ Funds are available to women seeking to be ordained to the ministry or for a post-baccalaureate degree program which would further her lay ministry
☐ Scholarships are awarded on a competitive basis
☐ Consideration is given to excellence of academic record, quality of the essay and financial need
☐ Preference is given to residents of the Diocese of Pennsylvania
☐ The Committee prefers to give a limited number of grants in the $2000-$6000 range rather than numerous smaller grants
☐ Grants are for one academic year, but may be renewable for two additional years
☐ Grants are paid semi-annually, directly to the Seminary or post-graduate institution
☐ All sections of the application must be completed, and all accompanying material must be received by the Scholarship Committee prior to the application deadline in order for the application to be considered.

Please address all questions and mail your application to the Scholarship Committee at the above address or email it to the Chair of the Scholarship Committee, The Rev. Barbara Abbott, barbarawabbott@gmail.com.
Church Training and Deaconess House Scholarship Application

Application For the academic year 20__-20__.

March 15th Deadline

New applicant ________ Renewal 1st____ 2nd___ Please print legibly

Name__________________________________________________
Last     first     middle

Date of Birth_________________

Permanent Address:
_____________________________________________________________________________
street     city     state     zip code

Phone #____________________ Email ____________________________________________

Current Address:
_____________________________________________________________________________
street     city     state     zip code

Mobile #___________________ Phone #____________________

Parish Membership_______________________________________Diocese______________________
name of parish

Preferred Mailing Address: ( ) permanent ( ) current email_________________________________

Education

College or University (list most recent first) Degree Date Rec’d/Expected
1)_________________________________________________________________________________
2)_________________________________________________________________________________
3)_________________________________________________________________________________

Occupation (list most recent first)

Employer Position Dates
1)_________________________________________________________________________________
2)_________________________________________________________________________________
3)_________________________________________________________________________________

I have been accepted at the following institution(s) for the academic year 20__- 20__. Please indicate program admitted to & anticipated year of graduation.
Name of Institution Degree Program Graduation Date
1)_________________________________________________________________________________
2)_________________________________________________________________________________
3)_________________________________________________________________________________
Recommendations - required of new applicants only

Three are required from individuals from the professional categories indicated. All recommendations should be sent directly, by these people, to the Scholarship Committee.

The Bishop of your home diocese

Name_______________________________________ email address__________________________

The Rector of your home parish:

Name________________________________________email address__________________________

Most recent employer (or faculty member if you are currently a student)

Name________________________________________email address__________________________

Financial Information - required of all applicants

Estimated expenses for one academic year

Tuition $___________

Room and Board $___________

Health Insurance $___________

Loan Payments $___________

Books & Supplies $___________

Other - please itemize $___________

Total of expenses $___________

Amount that you expect to be able to cover with your personal and family income/savings $_________

Amount you are requesting from us $_______________

Other sources of financial aid for which you have applied (or that you are currently receiving)

1)________________________________________$ amount__________________

2)________________________________________$ amount__________________

3)________________________________________$ amount__________________
Essay- new applicants only

Please type. Using no more than one 8 ½ X 11 sheet of paper (approximately 250 words), explain how you expect to use this post-baccalaureate educational training to advance your ordained or lay ministry within the Episcopal Church of the Church at large.

Documentation Check List

New Applicants: Completed application______

Official transcripts from undergraduate and all post-baccalaureate programs______

A copy of the letter of acceptance from the post-baccalaureate programs to which you have been admitted____

3 recommendations_____

Renewal applicants: Completed Application_____ 

Transcript from your most recently completed academic year_______

All transcripts must be sent directly from the academic institution
All material must be received by the Scholarship Committee prior to the March 15th deadline

Signature_________________________________________ Date_________________________