

## ABSALOM JONES SCHOLARSHIP FUND--2008

PURPOSE: St. Philip's Episcopal Church of Laurel, Maryland has established an annual scholarship fund to honor the contributions of Absalom Jones, first African American priest in the Episcopal Church. Two \$1,000 scholarships will be awarded in June 2008 to individuals who have demonstrated the qualities that were exemplified by the Rev. Absalom Jones and who are in need of financial assistance to further their education for undergraduate or graduate study at accredited colleges, universities, or vocational/technical institutes.

### ELIGIBILITY

1. Resides, works, attends school, or is a member of a parish in the Episcopal Diocese of Washington.
2. Is in need of financial assistance to continue education beyond high school.
3. Will be attending an institution of higher education, e.g., college, seminary, vocational/technical institute in the fall semester of the year in which application is being made.
4. Members of the Absalom Jones Scholarship Fund Awards Selection Committee and their immediate family members are not eligible for this award.

### APPLICATION PROCEDURE:

1. Submit a completed Absalom Jones Application Form (see attachment).
2. Submit a typewritten double-spaced essay of not more than four (4) pages which includes the following:
  - a. Description of yourself;
  - b. Indicate how you believe you have demonstrated the qualities exemplified by the Rev. Absalom Jones, i.e., compassion, leadership, service, interest in education.

The essay may also include:

- c. Accomplishments of which you are proud;
  - d. Your long and/or short-term goals;
  - e. Highlights of your life and activities in which you have been involved, including church and community service;
  - f. Major challenges you have faced and how you responded to them;
  - g. Your strengths and weaknesses.
3. Submit 3 letters of recommendation from teachers, supervisors, counselor, or community leader, or spiritual leader (must have been written in the past 3 months). Letters of recommendations will not be accepted from immediate family members of the applicant.
  4. Submit a statement indicating why there is a need of financial assistance to continue higher education. Statement may be by student or the student's parent/guardian.
  5. Provide proof of acceptance/enrollment in an accredited college, vocational school/technical institute, or seminary.
  6. In the event of questions, contact: the Chairperson of the Absalom Jones Scholarship Fund Committee at the St. Philip's Episcopal Church, 522 Main Street, Laurel, MD 20707, or send e-mail to [absalomjonesfund@stphilipslaurel.org](mailto:absalomjonesfund@stphilipslaurel.org)

### SELECTION CRITERIA:

1. Exemplifies the qualities Absalom Jones was known for: compassion, service, leadership, values education.
2. Financial need.
3. Lives, works, or attends school or church in the Episcopal Diocese of Washington.

AMOUNT OF ANNUAL AWARD: \$1,000

# OF AWARDS: 2-- One of the scholarships will be awarded in honor and memory of Ellen D. Washington, the driving force behind the Absalom Jones Window and Scholarship Fund. A second scholarship will be given in honor and memory of James Whitney, a long-time community volunteer and St. Philip's parishioner.

### APPLICATION DEADLINE:

1. The application package, which includes the letters of recommendation, the essay, and application form **MUST BE POSTMARKED BY March 31, 2008.**
2. Proof of acceptance or enrollment must be submitted by June 15, 2008.
3. Mail completed application to:  
Absalom Jones Scholarship Selection Committee  
St. Philip's Episcopal Church  
522 Main Street  
Laurel, MD 20707

1/1/08

**ABSALOM JONES SCHOLARSHIP APPLICATION FORM**

**Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Address** \_\_\_\_\_ **Home Phone:** (\_\_\_\_) \_\_\_\_\_

**City/State/ZIP** \_\_\_\_\_

**E-mail Address** \_\_\_\_\_

**Name of School Currently Attending** \_\_\_\_\_

**College/Seminary/Vocational School(s) you have applied to attend in the fall**

\_\_\_\_\_

**List any awards and/or honors you have received since beginning high school (school or community)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Name of parent(s)/guardian(s) with whom you reside:** \_\_\_\_\_

\_\_\_\_\_

**Number in household your parent(s)/guardian(s) currently supports financially (including applicant)** \_\_\_\_\_

**Please describe any circumstance that may affect your family's ability to pay for your continued education (medical, unemployment, divorce, etc.)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*For any of the above, you may attach an additional sheet(s) if necessary.*

**Required Signature:**

**All of the information I have provided in this application is accurate to the best of my knowledge and subject to verification by the Scholarship Selection Committee. I understand that this application and any supporting material submitted become the property of and will be retained by the Scholarship Selection Committee.**

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent's/Guardian's Signature** (if applicable\*) \_\_\_\_\_ **Date** \_\_\_\_\_

\*Signature of parent or guardian needed if applicant is under 18 years of age.