**FAITH: An Endowment for Orthodoxy and Hellenism** is pleased to once again sponsor a series of merit-based FAITH Scholarships for Academic Excellence for the seventeenth consecutive year. Please carefully read the criteria and requirement details. The enclosed application must be filled out by the applicant and submitted in its entirety. All required documentation must be included with your submission (see checklist on page 10).

**CRITERIA FOR ELIGIBILITY**

- Candidate must be of Greek Orthodox faith and member of a parish.
- Candidate must be a U.S. citizen and permanently reside in the United States. If a permanent resident, proof is required.
- Candidate must be a high school senior graduating from a public, private, or parochial high school in the United States of America, and embarking to study in an undergraduate degree program in the fall of 2021 at a 4-year accredited college or university in the United States.
- All applications must be postmarked by **June 21st, 2021**. Applications postmarked after this date will be marked late. Applications may be submitted at any time prior to deadline.

**REQUIREMENT DETAILS** *Please do not staple any items.*

- **Complete academic records**, including an official transcript, and copies of all applicable SAT, ACT, SAT Subject Tests and/or AP exam testing records. The official transcript must include spring 2021 semester grades. If spring grades are not finalized by the time of submission, please send latest available transcript along with an unofficial report card/progress report of spring 2021 grades. Please contact (212) 803-9363 or info@thefaithendowment.org for questions. Please note that copies of 2021 AP Exam scores are not required.

- A copy or transcript of applicant’s **Baptismal or Chrismation Certificate**

- **A resume** listing your extracurricular activities, school activities, volunteer work, internship and work experiences, leadership roles and/or church activities, etc.

- **An essay or personal statement** describing (1) how your studies will allow you to employ your talents, build a career and contribute to society, and (2) how this scholarship will help you use these talents to serve society, the Hellenic American community and/or Church at large *(approx. 300-600 words)*.

- **Two (2) letters of recommendation.** Please choose individuals that best represent the important aspects of your accomplishments and provide us with a true picture of your background. Recommenders must fill out the recommendation forms (see pages 7 and 8), enclose both the recommendation letter and filled out form in a signed or sealed envelope and mail directly to us. We recommend contacting recommenders early to ensure they have time to write a letter and mail to FAITH by the June 21st deadline. Recommendations must come from each category of individuals listed below:
  - Academic – from a teacher, advisor, or program director
  - Religious/Spiritual – from a priest or youth director
- Candidate must enclose a copy of the letter confirming acceptance and planned matriculation at an undergraduate college or university.
- **A calculation of expenses (page 6)** (detailed by type: tuition, books, fees, room, board, transport, etc.) and outlining sources of financial funding and support (listing all financial aid: loans, scholarships, grants, assistance from parents and/or others).
- **A copy of the financial aid package** provided to the student by the university. Please note in application if the student did not apply or accept the financial aid package.
- The FAITH Scholarships for Academic Excellence are awarded on a merit basis, however the amounts vary based on need. All applicants must complete section IIA. Applicants who would like to be considered for additional financial need-based funding, must submit all of the financial documents and information detailed below:
  - **A schedule of annual gross income and expense for 2020.** This schedule should show all sources of income received to meet your annual living expenses.
  - **Copies of your 1040 tax forms for the last three years (full tax return for 2020 and top two pages from 2019 and 2018).** In circumstances of any reported income or loss on the schedule of gross income and expense or on form 1040 from a corporation, limited liability company, partnership or trust, you must supply a copy of any such entity’s income tax return (form 1120, 1065 or 1041) along with such entity’s financial statements prepared by its accountant. In circumstances of divorce, applicants must provide copies of both parent’s tax returns. **Please be sure to white out/black out all social security numbers.**
  - If applicable, include a personal statement with an explanation of any special/extenuating circumstances.
  - In the event that the candidate graduated high school in 2020 and participated in a gap year, the candidate must provide a statement that includes how and where they spent the gap year and provide reasons and objectives for taking the gap year. Candidate must include two references that confirm their statement.
  - If necessary, the candidate should be available for a telephone interview at the Committee’s discretion. Late submissions or incomplete packets will not be accepted nor considered by the Committee. All applications must be received by mail.

Please mail complete application to:  
FAITH Endowment  
Attn: FSAE  
499 Park Avenue, 23rd Floor  
New York, NY 10022  
Telephone: 212-803-9363  

**Scholarship application packets must postmarked by June 21st, 2021**  
Applicants will be notified of Review Committee’s decision August 2021
APPLICANT’S INSTRUCTIONS

Information below must be completed by applicant. Please complete all sections of this application; print clearly; sign and return it together with all required documents. Application must be postmarked by June 21st, 2021. Submissions postmarked later than June 21st will be marked late. Please note that incomplete applications will not be considered for an award.

Today’s date: ______________________

I. PERSONAL INFORMATION

Name (First, Middle, Last): ________________________________

Mailing Address (Street/P.O. Box): ________________________________

City: ___________________________ State: ___________ Zip: ___________ Years at Current Address: ____

Phone Number: ___________________________ Email Address: ___________________________

Date of Birth: ___________________________ Place of Birth: ___________________________ Age: _____

IA. EDUCATION - HIGH SCHOOL

Name of High School: ________________________________ Type of School: □ Public □ Private □ Charter

School Address: ________________________________

City: ___________________________ State: ___________ Zip: ___________

GPA: _______ points out of _______ points (i.e. 3.75 pts out of 4.0 pts) Weighted GPA: _______ points out of _______ points

Letter Grade Average: ___________________________ Rank in Class: _______ out of _______

TRANSCRIPT:

Please enclose a sealed official transcript that includes spring 2021 semester grades. If spring grades are not finalized by the time of submission, please send latest available transcript along with an unofficial report card/progress report of spring 2021 grades. For any questions, call (212) 803-9363 or email info@thefaithendowment.org

□ My transcript (including spring 2021 semester) grades and is enclosed

IB. EDUCATION - UNIVERSITY

Name of Undergraduate University (must be an accredited 4-year institution): ________________________________

City: ________________________________ State: ___________ Zip: ___________

Enrollment Status (check applicable boxes): □ Accepted for full-time study □ Wait listed

Proposed Major: ________________________________ Degree Program: ________________________________
II. FAMILY INFORMATION

Father’s Name (First, Last): ________________________________
Email Address: ________________________________ Phone: ________________________________
Address, City and State (if different): ________________________________
Occupation: ________________________________ Employer: ________________________________ Number of Years: ______
Previous Employer: ________________________________ Number of Years: ______

Mother’s Name (First, Last): ________________________________
Email Address: ________________________________ Phone: ________________________________
Address, City and State (if different): ________________________________
Occupation: ________________________________ Employer: ________________________________ Number of Years: ______
Previous Employer: ________________________________ Number of Years: ______

Parent Marital Status:  □ Married/Remarried □ Single □ Divorced/Separated □ Widowed

Total Family Size including yourself (Number): ________________________________

Please list the names and ages of any dependents (22 years of age and younger) in your household:

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>School Attending</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

IIA. HOUSEHOLD GROSS ANNUAL INCOME

All applicants must complete section IIA. If you would like to be considered for additional financial need-based funding you must attach copies of your 1040 tax forms for the last three years (full tax return for 2020 and top two pages from 2 prior years). In circumstances of any reported income or loss on the schedule of gross income and expense or on form 1040 from a corporation, limited liability company, partnership or trust, you must supply a copy of any such entity’s income tax return (form 1120, 1065 or 1041) along with such entity’s financial statements prepared by its accountant. In circumstances of divorce, applicants must provide copies of both parent’s tax returns. In addition, please submit a schedule of annual gross income and expense for 2018 – 2020. This schedule should show all sources of income received to meet your annual living expenses.

2020: $ __________ Estimated income for 2021: $ __________
2019: $ __________
2018: $ __________

List all supplemental funds (and sources) you and your family have saved to attend college/university: ________________________________

______________________________________
IC. TEST SCORES AND DATES
Enter your ACT, SAT I and SAT II and AP Exam test dates and current highest scores earned if available. Leave any space blank that does not apply. Also list any planned test dates. If you have taken an exam more than once, record your highest score. For SAT I use your best total score; reading and mathematics scores must be from the same sitting. **You must enclose copies of records of each score.**

<table>
<thead>
<tr>
<th>SAT Test Date</th>
<th>Scores</th>
<th>ACT Test Date</th>
<th>Scores</th>
</tr>
</thead>
<tbody>
<tr>
<td>MO / YR</td>
<td></td>
<td>MO / YR</td>
<td></td>
</tr>
<tr>
<td>Reading &amp; Writing</td>
<td>Math</td>
<td>Total Score</td>
<td>English</td>
</tr>
<tr>
<td>Subject</td>
<td>MO / YR</td>
<td>Score</td>
<td>Subject</td>
</tr>
<tr>
<td>Subject</td>
<td>MO / YR</td>
<td>Score</td>
<td>Subject</td>
</tr>
</tbody>
</table>

ID. ADDITIONAL PERSONAL INFORMATION
Are you a Greek Orthodox Christian? ☐ Yes ☐ No If No, specify: __________________________

Please indicate your citizenship status: ☐ US Citizen ☐ Permanent Resident

Is your family or are you a member of a parish? ☐ Yes ☐ No

Parish Name: __________________________ Metropolis: __________________________

Parish Address: __________________________ Telephone: __________________________

Parish Priest: __________________________ List church organizations and the years that you have been involved: __________________________

Have you ever received (or are you a candidate for) recognition of a submission to the St. John Chrysostom Oratorical Festival? ☐ Yes ☐ No

If Yes, which level: ☐ Parish ☐ Metropolis ☐ National Date: __________________________

Have you previously applied for a FAITH sponsored Scholarship/Grant? ☐ Yes ☐ No Name/Year(s) of Award: __________________________

If Yes, are you a previous recipient of any FAITH awards? __________________________

How did you hear about this scholarship? __________________________
III. BUDGET FOR 2021-22

IIIA. SOURCE OF FINANCIAL SUPPORT

<table>
<thead>
<tr>
<th>Source of Financial Support</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Loans</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Institutional Scholarships</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Non-Institutional Scholarships</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Government Grants</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Other Financial Aid</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Supplemental Funds*</td>
<td>$ ________ .00</td>
</tr>
</tbody>
</table>

Specify Source: ____________________________

*All sources of financial assistance including, but not limited to, all family assistance, student trusts or 529 plans.

RESOURCE TOTAL $ ________ .00

IIIB. CALCULATION OF EXPENSES

<table>
<thead>
<tr>
<th>Expense</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Room</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Board</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Books</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Transportation</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Laboratory Fees</td>
<td>$ ________ .00</td>
</tr>
<tr>
<td>Other Expense</td>
<td>$ ________ .00</td>
</tr>
</tbody>
</table>

Specify Expense(s): ____________________________

EXPENSE TOTAL $ ________ .00

IV. APPLICATION ESSAY

On a separate page, please describe (1) how your studies and interests will allow you to employ your talents, build a career and contribute to society, and (2) how this scholarship will help you use these talents to serve society, the Hellenic American community and/or Church at large. (Recommended length: 300 - 600 word count)

I hereby confirm that I am the sole author of the enclosed essay.

Applicant signature: ____________________________ Date: ____________________________

V. RECOMMENDATIONS

Please indicate below the names and information of the individuals who will submit recommendations on your behalf:

- One from a Teacher or Academic Adviser and one from your Parish Priest/Youth Advisor.

Teacher or Academic Adviser Name: ____________________________ Title: ____________________________ Contact: ____________________________

Parish Priest or Youth Adviser Name: ____________________________ Title: ____________________________ Contact: ____________________________
Name of Applicant: _______________________________ Date: ___________________

Recommender’s Name: _______________________________ Title: ___________________

Address: ____________________________________________

Telephone: __________________________ Email: __________________________

How long have you known the applicant? _______________ In what capacity? __________________________

From your experience, how would you rate this applicant in terms of the following qualities:

<table>
<thead>
<tr>
<th>Qualities</th>
<th>Excellent</th>
<th>Good</th>
<th>Average</th>
<th>Needs Improvement</th>
<th>No basis for evaluation/Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic interest and motivation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intellectual ability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Creative, original thought</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sense of integrity and personal responsibility</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Displays maturity and respect towards others</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works cooperatively in a group setting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendance</td>
<td>&gt;90%</td>
<td>75-90%</td>
<td>50-75%</td>
<td>&lt;50%</td>
<td></td>
</tr>
</tbody>
</table>

Please include a statement below, or include as an attachment, on why you believe the applicant should be considered for the FAITH Scholarship for Academic Excellence. Please use this opportunity to also further explain the ratings you gave concerning the applicant’s academic interest and motivation, intellectual ability and creative, original thought.

Signature: ___________________________ Date: _____________________

Name of Applicant: ________________________________ Date: ________________________________

Recommender’s Name: ________________________________ Title: ________________________________

Address: ____________________________________________________________________________

Telephone: ________________________________ Email: ______________________________________

How long have you known the applicant? ____________________ In what capacity? __________________

From your experience, how would you rate this applicant in terms of the following qualities:

<table>
<thead>
<tr>
<th>Quality</th>
<th>Excellent</th>
<th>Good</th>
<th>Average</th>
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</tr>
</tbody>
</table>

☐ □ >90% □ 75-90% □ 50-75% □ <50% □

Please include a statement below, or include as an attachment, on why you believe the applicant should be considered for the FAITH Scholarship for Academic Excellence. Please use this opportunity to also further explain the ratings you gave concerning the applicant’s academic interest and motivation, intellectual ability and creative, original thought.

Signature: ________________________________ Date: ________________________________

AUTHORIZATION AND CERTIFICATION

I authorize FAITH and the Greek Orthodox Archdiocese of America (GOA) to release application information, including copies of my application to the FAITH Scholarship for Academic Excellence Committee (FSAE) or agent thereof.

I agree to have FAITH, the GOA and/or the FSAE or agent thereof to verify any and all of the application information given, including pertinent personal and financial information. The GOA and/or FSAE or agent thereof may contact my employer(s), references, as well as schools cited herein to substantiate this information.

If I am offered a scholarship, I understand I will need to provide my social security number in order to receive the scholarship.

I hereby certify that the information provided in this application is accurate and that I am the sole author of the application essay and all the attachments. I understand that if any information is found to be inaccurate or incomplete, the FSAE will deny me an award.

If awarded the FAITH Scholarship for Academic Excellence, I authorize FAITH and the Greek Orthodox Archdiocese of America to publicize my being a recipient.

Signature of Applicant ____________________________ Date: ____________
Signature of Parent / Guardian ____________________________ Date: ____________

Send the completed application and all required documents to:

FAITH Endowment, Attn: FSAE
499 Park Avenue, 23rd Floor, New York, NY 10022.

For additional inquiries, please call (212) 803-9363 or email info@thefaithendowment.org

APPLICATION MUST BE POSTMARKED BY JUNE 21st, 2021
INSTRUCTIONS

Please do not staple any items. Please review and fill out the following application checklist carefully and enclose it in your application packet. All of the checklist items (excluding recommendation letters or transcript) must be included in your application packet for proper processing of your application. When complete, please mail your application to: FAITH Endowment, Attn: FSAE, 499 Park Avenue, 23rd Floor, New York, NY 10022. Your application packet must be postmarked by June 21st, 2021. Applications postmarked after this date will be marked late. Incomplete applications will not be processed or considered. For any questions, please email info@thefaithendowment.org or call (212) 803-9363.

CHECKLIST: Please include completed checklist with application

☐ My application is completely filled out with a signed Authorization and Certification Form
☐ I have enclosed an official sealed academic transcripts that includes my spring 2021 grades
☐ I have enclosed copies of testing records for my AP, SAT and/or SAT Subject Tests and/or ACT tests
☐ I have enclosed a copy or transcript of my Baptismal or Chrismation Certificate
☐ I have enclosed my resume
☐ I have enclosed my application essay
☐ I have contacted my two recommenders and they will mail their letters to FAITH by June 21st, 2021
☐ I have enclosed a copy of the letter of acceptance from the undergraduate school I will be attending
☐ I have enclosed a copy of the financial aid package provided by the university

(Optional)
I would like to be considered for additional financial need-based allocations and have submitted:
- A copy of my household’s full 2020 Federal tax return and W-2s
- The first 2 pages of my household’s 2019 Federal income tax returns
- The first 2 pages of my household’s 2018 Federal income tax returns
- If there is any reported income or loss on the schedule of gross income and expense on form 1040 from a corporation, limited liability company, partnership or trust, I have enclosed complete copies of the entity’s income tax return (1120, 1065 or 1041) along with such entity’s financial statements prepared by its accountant. In circumstances of divorce, applicants must provide copies of both parent’s tax returns.

☐ I have completed and enclosed this completed checklist