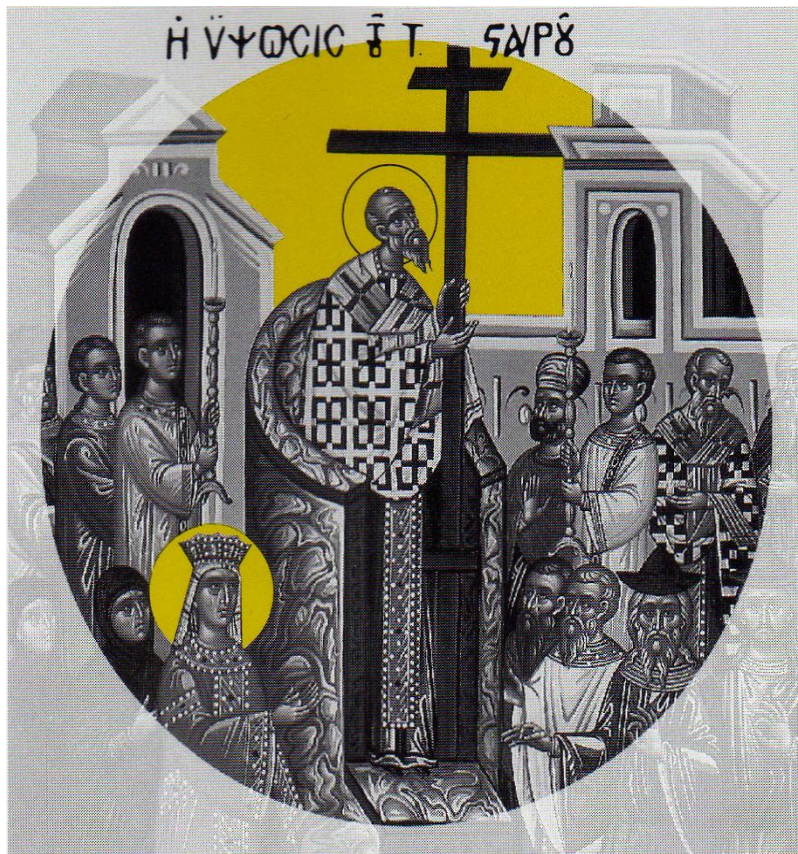


GREEK ORTHODOX COMMUNITY OF WINDSOR

"HOLY CROSS CHURCH"



SCHOLARSHIP APPLICATION

NAME OF APPLICANT

Address: _____

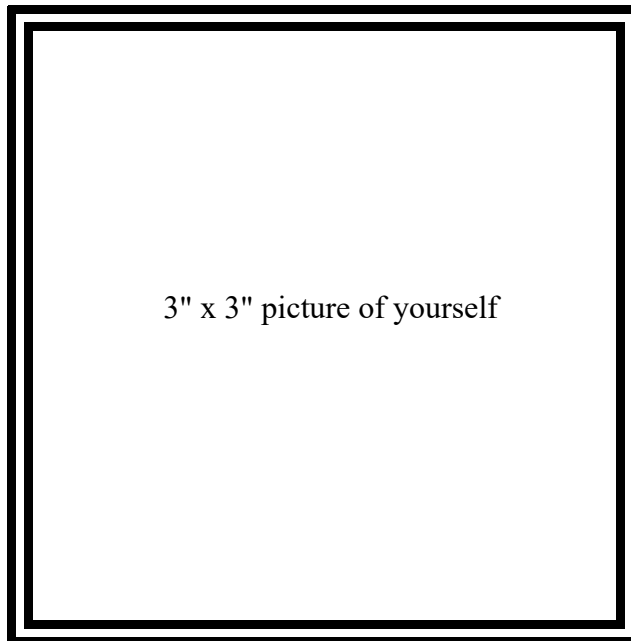
Phone No: _____

E-mail: _____

Date: _____

S.I.N.: _____ / _____ / _____

(Needed to issue a Cheque if you are a Scholarship Winner)



SCHOLARSHIP AWARD QUALIFICATIONS

1. The applicant can be male or female.
2.
 - i. The applicant shall be of Greek descent, (from father or mother).
 - ii. The applicant must be a Member or a child of an active member, for at least one year, of the Greek Orthodox Community of Windsor and its vicinity.
3. The applicant must be:
 - i. A student graduating from a Windsor or its vicinity High School.
 - ii. A student who has been accepted by a University or a Collage, provided that proof of acceptance is also submitted.
1. The applicant shall submit the following documents to the Community's Scholarship Chairperson or the President, **(the Scholarship Officials)**.
 - i. **An original copy of his/ her transcript, (in a sealed envelope please)**
 - ii. A letter of recommendation from the principal or guidance counselor of the high school from which he / she graduates.
 - iii. In the case of Article 3. ii. Above, **proof of acceptance is required.**
 - iv. An essay typewritten or printed (one page only) about your educational and vocational goals.
 - v. **The deadline of these scholarships is July 10th. No applications will be accepted if it is not in the hands of the Community Scholarship officials by the above date.**
 - vi. **The Community Scholarship officials shall assist the applicant making sure that he/she have all the necessary documents, making also sure that all the information that is provided is correct.**

SCHOLARSHIP APPLICATION

Name of applicant: _____

Date and Place of Birth: _____

Grade completed: _____

Name and address of school from which you are about to graduate (or have graduated).

Name of father (or court appointed legal guardian): _____

Name of mother (or court appointed legal guardian): _____

Are your Parents members of the Greek Orthodox Community of Windsor? Give details of their membership. (Year, Date etc.)

Are you a member of the Greek Orthodox Community of Windsor? _____

If so, give date and year you became member.

Anticipated major field of study: _____

Name of school you are accepted: _____

From which University or College, do you plan to graduate?

When: _____

1. Are you a Member or your Parents members of the Greek Orthodox Community of Windsor? Yes _____, NO _____. Give details.

2. List school activities (by class year, High school, societies, athletics, offices held.)

3. Name scholastic honors and awards achieved during the last two years.

4. List church and community activities, (Greek School, Sunday School, Altar boy, Goya, Volunteer and Charitable Organizations, Community Groups at large, time and years).

ENDORSEMENT

I, _____ the President or Scholarship Chairperson verify that the information the applicant has submitted, I find it to be true:

Therefore, I am pleased to recommend _____ as a

Candidate for a scholarship award.

The President or Scholarship Chairperson _____

Date: _____

