

**The Bishop William Evan Sanders
Scholarship Fund for
Racial Minorities**

SCHOLARSHIP GUIDELINES

Purpose: Established by the Diocese of East Tennessee in honor of and in recognition of the spiritual leadership of Bishop Sanders, the purpose of the scholarship fund is to provide tuition assistance to qualified students who are racial minorities from Episcopal churches of the Diocese of East Tennessee who are entering or engaged in higher education on the college or graduate level. Preference may be granted to otherwise qualified eligible minority applicants who are considering entering church vocations.

Granting Period: The scholarship will be granted on a yearly basis. The amount of tuition assistance will be determined annually by the scholarship committee based on the applicant pool and the availability of funds. Recipients of scholarship funds must present a request for renewal on an annual basis with appropriate documentation of continuing eligibility. See “Continuing Eligibility” below.

Initial Eligibility: Episcopal racial minorities (those of Native American, Hispanic, Asian/Pacific Islander or Black/African American descent) who submit an Application Form and who:

1. Demonstrate acceptance into an institution of higher learning;
2. Provide evidence of academic achievement (high school or college transcripts), “B”* or higher; and
3. Submit three recommendation forms- - one from a teacher, counselor, or principal, etc vouching for their academic potential; one from an employer or community leader; and one from clergy or senior warden at their home church or the recognized leader of their worshipping community.

* Those students with less than a “B” average who wish to be considered must attach a statement to the Application Form outlining any mitigating circumstances that should be taken into consideration when reviewing their educational attainment.

Continuing Eligibility: Students engaged in college level work must maintain a grade point average of “B” or better, provide evidence of academic achievement (college transcripts) and submit an Abbreviated Application Form to qualify for consideration for additional tuition assistance.

Application Procedures: Applications for the scholarship may be acquired by writing the Diocese of East Tennessee located at 814 Episcopal School Way, Knoxville, TN 37932 or by calling (865) 966-2110. Application materials will also be available on the web site: www.dioet.org. The Application Form and all attachments and recommendation forms must be returned by July 30. Notification of scholarship awards will be made soon after the application deadline.

ELIGIBILITY AND REQUIREMENTS

Eligibility and Requirements: High school seniors or college students who are Episcopal racial minorities (those of Native American, Hispanic, Asian/Pacific Islander, or Black/African American descent) in the Diocese of East Tennessee desiring to apply for tuition assistance must complete an Application Form and (1) demonstrate acceptance into an institution of higher learning; (2) provide evidence of academic achievement (high school or college transcripts) —“B” average* or higher; (3) and submit three recommendation forms — one from a teacher, counselor, principal, etc., vouching for their academic potential; one from an employer or community leader; and one from clergy or senior warden at their home church or worshiping community. Scholarship awards are for one year. Continuing eligibility requires college students maintain a “B” average, provide transcripts and submit an Abbreviate Application Form in order to be considered for subsequent awards.

*Those students with less than a “B” average who wish to be considered must attach a statement to the Application Form outlining any mitigating circumstances that should be taken into consideration when reviewing their educational attainment.

APPLICANT INFORMATION

NAME (Last, First, Middle)						
HOME ADDRESS (Street, City, State, Zip)						
DATE OF MO	BIRTH DAY	BIRTH YEAR	<input type="checkbox"/> MALE	SEX <input type="checkbox"/> FEMALE	TELEPHONE (Home)	(COLLEGE)

PARENT INFORMATION

NAME OF PARENTS	ADDRESS (Street, City, State, Zip Code)
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CURRENT SCHOOL INFORMATION

SCHOOL (Name and address)
PRIMARY COURSE OF STUDY
CURRENT YEAR OF STUDY HIGH SCHOOL <input type="checkbox"/> SENIOR // COLLEGE: <input type="checkbox"/> FRESHMAN <input type="checkbox"/> SOPHOMORE <input type="checkbox"/> JUNIOR <input type="checkbox"/> SENIOR

HIGH SCHOOL APPLICANTS ONLY

IN WHAT JUNIOR COLLEGE OR UNIVERSITY DO YOU WISH TO ENROLL? (Your choice will not affect your chance of winning a scholarship)
FIRST CHOICE
SECOND CHOICE
WHAT COURSES OF STUDY DO YOU PLAN TO TAKE?
WHEN DO YOU PLAN TO ENROLL?

WORK INFORMATION

HAVE YOU BEEN EMPLOYED OR HAVE YOU WORKED AS A VOLUNTEER (INCLUDING SUMMERS)? IF YES, COMPLETE BELOW:				FROM MO/YEAR	TO MO/YEAR	HRS PER WEEK
COMPANY	POSITION	SUPERVISOR	PHONE			

ACTIVITIES, AWARDS AND HONORS INFORMATION

LIST ALL SCHOOL ACTIVITIES IN WHICH YOU HAVE PARTICIPATED THE PAST FOUR YEARS (E.G. STUDENT GOVERNMENT, MUSIC, SPORTS, ETC.) LIST ALL COMMUNITY ACTIVITIES IN WHICH YOU HAVE PARTICIPATED WITHOUT PAY DURING THE PAST FOUR YEARS (E.G. BOY/GIRL SCOUTS, HOSPITAL VOLUNTEER, SPECIAL OLYMPICS). INDICATE ALL SPECIAL AWARDS, HONORS AND OFFICES HELD.

ACTIVITY	# YRS INVOLVED	SPECIAL AWARDS & HONORS	OFFICES HELD	SUPERVISOR/SPONSOR

GOALS & ASPIRATIONS	MAKE A STATEMENT OF YOUR PLANS AS THEY RELATE TO YOUR EDUCATIONAL CAREER OBJECTIVES AND FUTURE GOALS	

CHURCH INFORMATION	NAME OF PARISH	
	ADDRESS (STREET, CITY, STATE, ZIP)	TELEPHONE ()
	NAME OF PRIEST (OR SR. WARDEN OR LEADER OF WORSHIPING COMMUNITY)	
	ADDRESS (STREET, CITY, STATE, ZIP)	TELEPHONE ()

APPLICATION CHECKLIST	THIS APPLICATION FOR A SCHOLARSHIP BECOMES COMPLETE AND VALID ONLY WHEN YOU HAVE RETURNED ALL OF THE FOLLOWING MATERIALS
	<input type="checkbox"/> STUDENT APPLICATION <input type="checkbox"/> RECOMMENDATION LETTERS <input type="checkbox"/> CURRENT TRANSCRIPTS OF GRADES
	RETURN APPLICATION AND ALL MATERIALS TO: WILLIAM E. SANDERS SCHOLARSHIP FUND C/O THE DIOCESE OF EAST TENNESSEE 814 EPISCOPAL SCHOOL WAY KNOXVILLE, TN 37932 THE STUDENT IS RESPONSIBLE FOR SUBMITTING ALL MATERIALS ON TIME. REFER TO SCHOLARSHIP GUIDELINES FOR POSTMARK DEADLINE.

SELECTION OF RECIPIENTS	RECIPIENTS ARE SELECTED BY A SCHOLARSHIP COMMITTEE BASED UPON CRITERIA DESCRIBED IN THE SCHOLARSHIP GUIDELINES.
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RELEASE OF INFORMATION	I AUTHORIZE MY SCHOOL TO PROVIDE CONFIDENTIAL INFORMATION, INCLUDING TRANSCRIPTS AND GRADES TO THE SCHOLARSHIP SELECTION COMMITTEE.
	SIGNATURES _____
	APPLICANT (PARENT, IF APPLICANT IS UNDER AGE 18) _____ DATE _____
	MY SIGNATURE ALSO AFFIRMS THAT ALL INFORMATION GIVEN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

TRANSCRIPT INFORMATION	STUDENTS MUST INCLUDE A TRANSCRIPT OF GRADES AND HAVE THE FOLLOWING SECTION COMPLETED BY THE APPROPRIATE SCHOOL OFFICIAL
	COMPLETE AS APPLICABLE FOR HIGH SCHOOL SENIORS
	APPLICANT RANKS _____ IN A CLASS OF _____ CUMULATIVE GRADE POINT AVERAGE _____ /4.0 SCALE
	PSAT: VERBAL _____ MATH _____ / SAT: VERBAL _____ MATH _____ / ACT: VERBAL _____ MATH _____
	SCHOOL OFFICIAL SIGNATURE: _____
	NAME _____ TITLE _____ DATE _____
	SCHOOL OFFICIAL ADDRESS (STREET, CITY, STATE, ZIP) _____ TELEPHONE (____) _____

OTHER INFORMATION	IF YOU WISH TO ADD ANY INFORMATION ABOUT EXTRA CURRICULAR OR VOLUNTEER/CIVIC ACTIVITIES, PLEASE ATTACH ADDITIONAL PAGES TO THE APPLICATION FORM.
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The Bishop William Evan Sanders Scholarship
Recommendation Form

Student Name: Last _____ First _____ M.I. _____

Please evaluate the candidate listed above by completing the following information:

Ability and Personality Traits: Please rate each area, placing the appropriate number in the box.

Ranking Scale:

5 = Exceptionally High 4 = Above Average 3 = Average 2 = Below Average

Personal Integrity	
Social and Emotional Qualities	
Ability to Work with Peers	
Ability to Work with Adults/Supervisors	
Leadership Qualities	
Oral Communication Skills	
Written Communication Skills	
Creativity	
Problem Solving Ability	

Please describe how the candidate exemplifies or demonstrates the qualities and ideals taught or advocated by the Episcopal Church.

Indicate your overall endorsement of the candidate by checking the appropriate box:

- Highly Recommended
- Recommended
- Recommended with Reservation
- Not Recommended

Signature: _____ Date: _____

Name (please print): _____ Title: _____

Relationship to Candidate: _____

Please Return to: The Bishop Sanders Scholarship Fund, Diocese of East Tennessee, 814 Episcopal School Way, Knoxville, TN 37932 by July 30.