

*First Episcopal District Lay Organization*  
*African Methodist Episcopal Church*  
Frank C. Cummings Scholarship Fund, Inc.  
African Methodist Episcopal Church

**2023 SCHOLARSHIP APPLICATION**

DATE \_\_\_\_\_

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**Last Name**

**First Name**

**Middle**

**Home Address**

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**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Name of High School/College**

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**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Name of Church** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Telephone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Cell #** \_\_\_\_\_



## **APPLICANT'S CHECK LIST**

<b>Application Requirements</b>	<b>Yes</b>	<b>No</b>
<b>1. Completed application (must be typed)</b>		
<b>2. A letter of Acceptance from the school attending</b>		
<b>3. Resume</b>		
<b>4. (3) Letters of recommendation</b>		
<b>5. Essay Personal Statement</b>		
<b>6. Full written statement showing financial need</b>		
<b>7. Local Lay Organization signature</b>		
<b>8. Conference President signature</b>		
<b>9. If enrolled in college submit Transcript</b>		
<b>10. Review Scholarship Application Scoring Rubric</b>		