

Application for Academic Stipend 2019-2020 Academic Year

- A.** Applicant, applicant parents, or grandparents must be member(s) in good standing at St. James'. Applicant must be confirmed in the Episcopal Church, attend at least 3 services per year, if present on the Big Island, and applicant, applicant parents, guardian and/or grandparents must have submitted a 2019 pledge card to St. James' Parish.
- B.** Funding is to be for undergraduate education expenses beyond High School at an accredited educational institution (vocation or academic).
- C.** Funding is to be used only for tuition or books.
- D.** Application must be completed and signed by the applicant and also signed by the applicant's parent, grandparent and/or legal guardian.
- E.** Applicants attending St. James' and/or participating in St. James' activities, and those pledging, are given greater consideration than non-participating/non-pledging applicants.
- F.** Applicants receiving a stipend may be asked to be available for a group photograph and report to the congregation upon receipt of the stipend.
- G.** Applications are due no later than Friday, **May 17, 2019** with stipend notification and presentation made by the end of May 2019. The applicant must return the completed application to the parish office by no later than 5 PM Friday, May 17th via: scan (PDF Only) and email to office@stjameshawaii.org, or fax to 808-887-2713, or mail to St. James' Episcopal Church, PO Box 278, Kamuela, HI 96743 or drop off a hard copy at the parish office.
- H.** Submission of stipend application does not guarantee that a stipend will be provided by St. James' for the 2019 -2020 year.
- I.** For applicants recently accepted to a university, community college or vocational school, the applicant must attach documentation that they are accepted to the institution.
- J.** For repeat applicants attending a university, community college, or vocational school, the applicant must provide their most recent transcript or proof of attendance for the previous quarter/semester.

**(BE SURE TO SUBMIT ALL ITEMS REQUIRED WITH THIS
APPLICATION AS OUTLINED ABOVE IN PARAGRAPHS I & J OF
ELIGIBILITY REQUIREMENTS).**

Name of Applicant: _____

Mailing Address of Applicant: Street/PO Box _____

City _____ State _____ Zip Code _____

Phone Number of Applicant _____

Email Address of Applicant _____

Name and Address of Family Member(s) in Good Standing at St. James' Episcopal Church

Name and Location of College or Academic Institution Attended by Applicant

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Educational Goal of Applicant: _____

Signature of Applicant:

Signature of Parent/Guardian:

Date: _____