

Corner of Clinton and State Streets

Christ Episcopal Church

200 State Street
P.O. Box 385
Charlevoix, Michigan 49720-0385
(231) 547-6322

2025 Christ Episcopal Church Education Scholarship Eligibility Requirements, Terms, and Instructions

Christ Episcopal Church Education Scholarship has annually been assisting Charlevoix area high school graduating seniors to participate with post-secondary education. This scholarship opportunity was introduced to the local high school community in 2011.

Members of Christ Episcopal Church embraced the scholarship program and have helped provide annual awards to 42 students.

This year, Christ Episcopal Church will award up to **three (3) \$1,000.00** scholarships. **While 2 year and 4 year college students** most often apply, **students pursuing vocational/technical study resulting in a degree or certification from a credentialed institution/program ARE INCLUDED** as eligible applicants.

ADDITIONALLY, CEC is offering a separate scholarship for \$1000.00 to any student with intent to study for a MEDICALLY-RELATED degree.

This includes, but is not limited to, physician in any medical discipline (including veterinary), nursing, dentistry, Emergency Medical practitioner, credentialed therapy practitioner e.g., speech, occupational, physical, respiratory, cardiology and X-ray/imaging, phlebotomy/lab & oncology tech, and pharmaceutical (INCLUDING research).

Pursuant Careers in PHARMECEUTICAL or MEDICAL EQUIPMENT SALES ARE NOT ELIGIBLE for this application.

Please take the time to read the instructions outlined below completely and thoroughly before filling out your application.

All applications must be received or postmarked by April 01, 2025.

Eligibility Requirements

1. Graduating seniors must attend high school full-time in Charlevoix County.
2. Applicants must be in good academic standing.
3. Applicants must submit a fully completed application postmarked by the deadline.
4. Applicants must plan to attend an accredited college, university, or technical school (not limited to the state of Michigan) in the fall of 2025.

Terms of Scholarship

1. Up to three (3) \$1,000.00 scholarships will be gifted.
2. ONE (1) \$1000.00 scholarship will be gifted for study specific to a medically-related field.
3. The scholarship may be used for any school related expense.
4. Scholarship recipients are notified by telephone, and/or email.

Application Instructions

1. Please PRINT neatly or type.
2. You must complete the entire **scholarship application form**. If information is not applicable, please identify as N/A.
3. Enclose the following:
 - a. A completed **application** form. Please indicate IF you are applying for the medically related scholarship. You must only choose ONE scholarship from the four (4) being offered.
 - b. A copy of your academic **transcript**
 - c. Your **standardized test scores**
 - d. At least **one (1) letter of recommendation** or reference (from administrator, teacher, or school employee, employer, community leader,). Multiple letters of recommendation will be accepted.
 - e. An **essay**, with a maximum of 500 words, explaining your career aspirations/goals and how higher education will assist you in achieving these goals.
 - f. A copy of a **letter of acceptance** from the school/credentialed agency/program you plan to attend in the fall (or acceptance letters from schools you are considering)
 - g. A **copy of your Free Application Federal Student Aid (FAFSA) score, including the Expected Family Contribution (EFC).**

Award Process

The Christ Episcopal Church Education Scholarship Ministry will review all complete applications received by the deadline. Scholarship recipients will be selected on the basis of financial need, scholastic achievement, the essay as well as involvement in school and community activities. All information included in the application will be held in strictest confidence.

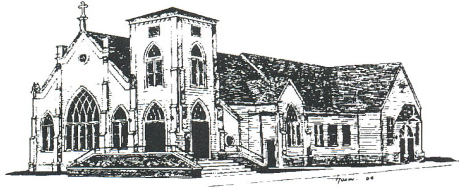
**BEFORE SENDING IN YOUR APPLICATION – STOP AND DOUBLE CHECK:
HAVE YOU ENCLOSED THE FOLLOWING IN THE APPLICATION PACKET?**

- Fully completed application form. Remember to indicate if you are applying for the Medically-Related Study application.
- Your academic transcript.
- Your Standardized test scores.
- At least one letter of recommendation
- Your essay
- Your letter(s) of acceptance to post-secondary education institutions
- FAFSA appraisal with EFC

APPLICATIONS CAN BE MAILED DIRECTLY TO:

**CHRIST EPISCOPAL CHURCH
ATTN: SCHOLARSHIP MINISTRY
P.O. BOX 385
CHARLEVOIX, MI 49720**

Please direct any questions to the Christ Episcopal Church Education Scholarship Ministry, by calling Pam Sroufe, Ministry Convener at 989 400-6790 or by email at pdbroufe@hotmail.com. Messages can also be left at the CEC office, 231-547-6322.



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Christ Episcopal Church Scholarship Application

Deadline: April 01, 2025
(Please print or type)

Name _____ Date of Birth _____

Address _____ MI _____
street city zip code

Telephone_() _____ Email: _____

Graduating High School _____

Intended Course of Study _____

Please indicate here if this is for medically-related study

How are you financing your education? _____

What is your Expected Family Contribution (EFC) for college expenses? _____

Have you been awarded any scholarships or grants? Yes _____ No _____

If yes, describe the source, _____

Amount and duration of the funds _____

Extra-curricular activities:

Community involvement:

Work Experience:

Signature of Applicant _____

(Use back of sheet if you need more space for any item.)