

**MEMORIAL SCHOLARSHIP FUND**  
**APPLICATION GUIDELINES**  
*Applications are due May 31st*

1. An applicant for scholarship aid must be a **female member** of the **Episcopal Church** and have been a **member** of the **Diocese of Washington** for at least one year prior to the time of the request. Priority will be given to members resident in the Diocese of Washington.
2. An applicant for scholarship aid must be a candidate at the **graduate or professional school level** and the course of study selected must be in the fields of theology, counseling, social work, health administration, nursing and medicine. Women enrolled in the Diocesan Diaconate program are eligible.
3. The applicant shall provide the Custodian of the Memorial Scholarship Fund with a statement that includes:
  - = institution where the student will be enrolled
  - = course **of study** to be pursued
  - = costs for such study
  - = expenses sought other than tuition costs.

The following letters of recommendation shall accompany the application form:

- = applicant's **rector or vicar** in the Diocese of Washington
- = academic **contact** in applicant's major field
- = personal **reference**

All applications must be submitted by May 31<sup>st</sup> for the following school year.

4. A Committee of three including the President of the Episcopal Church Women, shall be appointed by the Custodian of the Memorial Scholarship Fund, to review applications and present to the ECW Diocesan Board a résumé of each applicant along with it's recommendations for the award(s). The ECW Board will make the final decision.
5. Checks from the Fund on behalf of approved students shall be made **payable directly to the school** where the student is enrolled.
6. The recipient of an award shall provide the Episcopal Church Women, Diocese of Washington, through the Custodian of the Memorial Scholarship Fund, a report of her academic progress within **six months** of receipt of the award.
7. Send application to:  
Memorial Scholarship Fund Custodian  
ecw@ecw-edow.org

**MEMORIAL SCHOLARSHIP FUND -- APPLICATION**  
**EPISCOPAL CHURCH WOMEN, DIOCESE OF WASHINGTON**  
**Due May 31<sup>st</sup>**

Date: \_\_\_\_\_

*Please print or type. Starred items (\*) items must be completed.*

\*Name: \_\_\_\_\_ \*Marital Status: \_\_\_\_ (Married, Single, Divorced)

\*SS#: \_\_\_\_\_ \*No. Dependents: \_\_\_\_\_

\*Address: \_\_\_\_\_ \*Phone #: \_\_\_\_\_

\*City/State: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

\*School to which accepted: \_\_\_\_\_

\*Enrollment Status: \_\_\_\_\_

\*Degree Sought: \_\_\_\_\_ \*Major: \_\_\_\_\_

\*Check payable to: (school name) \_\_\_\_\_

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

\_\_\_\_\_  
\*Phone: \_\_\_\_\_ DATE TUITION DUE: \_\_\_\_\_

\*Proposed Budget for School Year:

Fees: \_\_\_\_\_ Dormitory/Other: \_\_\_\_\_

Transportation, Incidentals: \_\_\_\_\_ Total: \_\_\_\_\_

\*Proposed Sources of Financial Aid:

Help: \_\_\_\_\_ Other Sources: \_\_\_\_\_

Sources: \_\_\_\_\_ Total: \_\_\_\_\_

**Undergraduate College/University & Location:**

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**Undergraduate Major:** \_\_\_\_\_

**Undergraduate Degree Earned:** \_\_\_\_\_

**\*Parish Membership:** (Diocese of Wash.) \_\_\_\_\_

**\*Name of Rector/Vicar:** (Diocese of Wash.) \_\_\_\_\_

**\*Letters of Recommendation must accompany application from:**

(1) **Rector/Vicar:** \_\_\_\_\_

(2) **Academic contact in major field:** \_\_\_\_\_

(3) **Personal reference:** \_\_\_\_\_

(4) **If seeking ordination, from Parish Intern Committee:** \_\_\_\_\_

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**\*Courses of Study:**

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(4) \_\_\_\_\_

(5) \_\_\_\_\_

**\*Statement of Purpose for seeking graduate degree and how you plant us use it:**

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**\*Any additional information you wish to include:**

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