Investing in our children is investing in our future.

THE JAMES E. DENSON SCHOLARSHIP FUND
ADMINISTERED BY THE MINISTERS AND DEACONS
FELLOWSHIP ALLIANCE

The cost of continuing education continues to rise, making parents wonder: better future for me or for my children?

The James E. Denson Scholarship was created by the Ministers and Deacons Alliance to assist deserving students in meeting the financial burden of a higher education. Our goal is to help every student succeed - education is one of the most important tools a person can have. Getting that education is also the best investment one can make.

Make a Donation and Make a Difference!
If you wish to make a donation to this program, you can do it right now!
Pass it forward!
Guidelines

**Eligibility**
Applicant must be an IRS eligible dependent youth of a faith-based affiliation with at least a one year active membership within the Church.

Applicant must be a high school graduate accepted by and enrolled as a Freshman in a local accredited college, university, or vocational education institution.

Applicants can re-apply annually; however, a streamlined process for subsequent semesters or quarters may be used within a school year. A successful Applicant receiving an award may apply for subsequent scholarship awards by submitting proof of continuing enrollment for a school year. **There are no guarantees of subsequent awards;** however, some weight may be given to continuing students. *(See Selection Criteria)*

Applicant must be enrolled in a minimum of one full time class, for which academic units are awarded, during the college or university semester or quarter for which the award is granted.

This application will be used for scholarships offered throughout the academic year. You are responsible for reading the requirements of this application process and submitting all information on or before the specified deadline.

**Area of Study**
Any Major or course of study will be considered, however some weight will be given in the selection process to traditional courses of study and/or to educational goals that enhance the individual's career development.

**Scholarship Amount**
Scholarships will be awarded in the fall of each year. There will be two (2) scholarship awards available per year, depending upon the amount of funds available and will be paid within four (4) weeks of the application deadline in order to maximize the assistance provided. They will be awarded directly to the Applicant, his/her other parent or guardian and will vary from $500 for any community college, vocational education institution or any four-year college/university. The Committee will determine the amount to be awarded to each successful Applicant based on the Selection Criteria.

**Scholarship Awards**
Scholarship awards are to be applied towards tuition, fees, books, supplies and/or equipment required for the courses at the educational institution.

**Selection Criteria**
Scholarships will be based on financial need, personal motivation, educational and career goals, and extracurricular activities, as well as consider the overall quality of the application and the funds available to the Committee for scholarships.

Committee members will establish potential conflict of interest issues. Casual knowledge of an Applicant is not sufficient to warrant their exclusion from review and/or discussion of that application.
**Application Deadlines and Award Dates**

It is the intent of the Scholarship Committee to maximize the assistance provided by making financial awards as early as possible. Fall Semester Award - Application deadline October 31st with award(s) made by November 30th.

Recipient(s) will be notified by letter within 14 days of a decision by the Committee. Then Recipient will have 7 to 10 days to respond so as not to delay necessary information to the institution, if necessary.

**Scholarship Committee**

The Scholarship Committee is a standing or continuing Committee of at least three (3) persons who will oversee the application review and award process and the financial management of the Scholarship Fund. Application Screenings will include two (2) Pastors, two (2) Deacons and all members of the Scholarship Committee. It will first determine that each application is complete and complies with eligibility requirements.

**Miscellaneous Information**

The Ministers and Deacons Alliance reserves the right to use the name and/or photograph of scholarship award Recipients in promotional materials designed to increase awareness of the Scholarship Fund, and to solicit funding or advertise fund raising events for the Scholarship Fund.

By accepting scholarship awards, Recipients understand their college, university or vocational education institution may request confirmation of scholarship awards from the Alliance in connection with institutional financial aid matters.

*Interviews may be required of scholarship finalist*

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. YOU MUST SIGN YOUR ORIGINAL APPLICATION.**

For additional questions or information, please contact any Committee Member.

Janice Gaither, Scholarship Committee Chair
The Ministers and Deacons Alliance
PO Box 6615
Mount Airy, NC 27030
Telephone: (336) 783-0333 (Home)
Email: mda_1997@yahoo.com or jconnor212@yahoo.com

Rev. Thomas Williams, Jr.
Courtney Williams
c/o Shiloh Missionary Baptist Church
PO Box 416
Mount Airy, NC 27030
Telephone: (336) 719-2417 (Home) / Email: tmwjr76@gmail.com
Application Criteria
Submission Deadline is October 31st
PLEASE READ ALL DIRECTIONS CAREFULLY

The following information must be submitted with this application. It will not be accepted separately unless requested by the Committee during the Pre-Screening Process.

NOTE: Check the boxes when you have completed the task

☐ Two completed Scholarship Fund Application Forms
   (1 original and 1 copy – BOTH MUST BE TYPED and SIGNED)

☐ Two signed and dated Character Letters of Recommendation
   (Must not be a relative, Pastor or Church Member)

☐ Transcripts (photocopy of official transcripts are acceptable)

☐ Cost per course of study (Must be on Institution Letterhead)

☐ Copy of current class schedule (Must be on Institution Letterhead)

☐ Copy of Letter of Acceptance from college, university or vocational education institution applicant will attend, or statement explaining acceptance

☐ A brief statement/essay consisting of approximately 100 words (must be typed and signed) stating educational objectives, career goals, financial need, past and current extracurricular activities (community involvement) and how this scholarship will help you reach your goals. Your statement/essay should be typed with 12 point print, have proper grammar and appropriate writing style. This will play a part in your application being considered.

☐ Mail the original completed Applications with relevant attachments directly to:

Janice Gaither, Scholarship Committee Chair
The Ministers and Deacons Alliance
PO Box 6615
Mount Airy, NC 27030
Telephone: (336) 783-0333 (Home)
Email: mda_1997@yahoo.com or jconnor212@yahoo.com
Name: ____________________________________________________________________________
  Last                         First                         Middle Initial
Address: ____________________________________________________________________________
Contact No.: ____________________________
  (home, work, mobile, etc.)
E-mail: ____________________________________________________________________________
Date of Birth: ____________________________
Employer: ____________________________________________________________________________

PARENTAL/FINANCIAL INFORMATION
Father: ____________________________________________________________________________
  Last                         First                         Middle Initial
Occupation: ____________________________________________________________________________
Income: ____________________________________________________________________________
  (Please state in dollar amount per week, bi-week, month, bi-month or annual)
Mother: ____________________________________________________________________________
  Last                         First                         Middle Initial
Occupation: ____________________________________________________________________________
Income: ____________________________________________________________________________
  (Please state in dollar amount per week, bi-week, month, bi-month or annual)
How many children in the household are in:  High School: ___________  College: ___________
Have you applied for admission to a college? __________

Have you been accepted? __________

If yes, what is the name of the institution? _______________________________________________________

What is your current academic major? ____________________________________________________________

Have you applied for other financial assistance? __________

If so, have you received any assistance? If so please list the organizations: ____________________________

List your extracurricular activities while in High School: _____________________________________________

List your activities including community service involvement and positions currently held outside of High
School: _____________________________________________________________________________________

What schools have you attended?

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Briefly describe your career interest:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
Briefly describe your educational goals and accomplishments, both short term and long term:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Briefly describe how this scholarship will assist you in reaching your goals:

________________________________________________________________________________________
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Briefly describe your financial need:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Briefly list and describe any additional information that you would like the Committee to know about you in considering your application:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

I, the undersigned verify that I am the sole author of this application and that all statements herein are true and factual to the best of my knowledge. I have read the criteria for the scholarship for which I am applying and believe that I am eligible.

Printed Name of Applicant

Date

Signature of Applicant