



METROPOLIS
OF ATLANTA

St. George Greek Orthodox Church

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A scholarship committee has been established to screen applications and select eligible recipients for the VICTORIA PANOLD SCHOLARSHIP AWARD FOR YEAR 2018

PURPOSE

The purpose of the scholarship program is to provide financial assistance to eligible recipients.

SELECTION CRITERIA

An applicant must be a resident of Florida

An applicant must be an ACTIVE**** and PARTICIPATING member in good standing of St. George Greek Orthodox Church of Hollywood, for a minimum of two consecutive years from the date of the application. (i.e. For the present year, the applicant or his/her immediate (parents or legal guardian) family must be current on their amount due to St. George Greek Orthodox Church at the time the application is submitted to the scholarship committee, and, also, at the time the scholarship award is presented to the recipient.) For the year immediately prior to the present one, the total pledge amount must have been paid in full during that year.

PLEASE NOTE: The MINIMUM pledge for an applicant's family must be **\$500.00**

An applicant must have a Grade Point Average (GPA) of 3.0 or better.

High School – Grades 9 – 12

College – Undergraduate Program or Post Graduate Program

An applicant must be recognized as a full-time student by the institution he/she plans to attend.

Two letters of character reference must be submitted.

A photo of the applicant is required.

RENEWAL

A recipient of a VICTORIA PANOLD SCHOLARSHIP is eligible to re-apply for continuance if the applicant's academic performance for the previous year is satisfactory to the scholarship committee.

APPLICATION DEADLINE: JUNE 27, 2018

SUBMIT COMPLETED APPLICATION (IN SEALED ENVELOPE) TO:

St. George Greek Orthodox Church of Hollywood
ATTN: Scholarship Committee Chairperson – Mrs. Patricia Karambis
425 N. 58th Avenue
Hollywood, Florida 33021
954-432-7728

SCHOLARSHIP APPLICATION FORM

PLEASE TYPE OR NEATLY PRINT ALL REQUESTED INFORMATION.

I. SOCIAL SECURITY NUMBER: _____

II. NAME OF APPLICANT:

LAST NAME MIDDLE NAME FIRST NAME

III. ADDRESS FOR CORRESPONDENCE

Number and Street

_____, Florida _____
City Zip Code Telephone Number

IV. DATE OF BIRTH AND SEX

Month: _____ Day: _____ Year: _____ Male: _____ Female: _____

V. COMPLETE THE APPROPRIATE CATEGORY: A or B:

A. PROPOSED GRADUATION DATE FROM HIGH SCHOOL:

_____/_____/_____
Month Day Year

Official high school transcript is enclosed: _____YES _____NO
If you checked "NO", please state when this information will be provided.

Name of college or university in which I have been accepted:

Name

Street Address City State Zip Code

Admission's Telephone Number: _____

Major Field of Study _____ Degree Seeking _____

During the academic year for which I am submitting this application, I will be
Classified as a:

_____ Freshman _____ Sophomore _____ Junior _____ Senior

Copy of Acceptance Letter is enclosed: _____ Yes _____ No. If you checked "NO", please state when this information will be provided.

B. Proposed Graduation Date from College: _____ / _____ / _____
Month Day Year

Name of college or university for which I have been accepted:

Street Address City State Zip Code

Admission's Telephone Number _____

Major of Study _____ Date of First Entry _____

Degree Seeking _____

How many years are required to complete the degree for which you seek? _____

How many years have you completed? _____

Current, sealed, college transcript is enclosed: _____ YES _____ NO

If "NO", when will this information be available? _____

VI. CAREER OBJECTIVE (S)

VII. CHARACTER REFERENCE LETTERS

Two character reference letters will be sent by:

1. _____
Name Address Telephone #

Relationship to applicant: _____

2. _____
Name Address Telephone #

Relationship to applicant: _____

VIII. FINANCIAL STATUS (if applicable)

A. Check the appropriate lines if you have applied for any of the following financial assistance:

_____ Financial Aid _____ Grants _____ Loans _____ Other Scholarships

If you have checked the category for "Other Scholarships", please provide the Name (s) of the scholarship (s):

B. Please respond in writing to the following statement:

I AM APPLYING FOR A VICTORIA PANOLD SCHOLARSHIP BECAUSE:

C. Will you be working while attending school? _____ YES _____ NO

IX. CHURCH AFFILIATIONS

Please list the current church organizations or programs you are affiliated with:

X. VALUE STATEMENT

What values do you plan to promote after receiving your diploma or degree?
(i.e. purpose, ideals, philosophy of life, community service, etc.)

XI APPLICANT’S CERTIFICATION

I hereby affirm that to the best of my knowledge and belief that the information provided is accurate.

Applicant’s Signature

Date

ADDENDUM: (Effective June, 2002)

RE: *****ACTIVE Church Membership as defined by the St. George Greek Orthodox Scholarship Committee includes but is not limited to:

1. Applicant and/or applicant's immediate (parents or legal guardian) family REGULARLY attend church service, and actively participate in all church luncheons and fundraisers including, but not limited to the annual Greek Festival and all dinner dances.
2. Applicant and/or applicant's immediate (parents or legal guardian) family has fulfilled his/her/their monetary pledge.
3. These scholarships are being granted based upon the applicant's scholastic standing, which of course, is important, but also, on the expectation of the recipient(s) to maintain an ongoing contact with St. George and the community as we shall depend on them, in the future, to perpetuate the Greek Orthodox Faith

ADDENDUM: (Effective June, 2011)

Each recipient shall personally be awarded his/her scholarship check following church services on a designated August date. The recipients personal attendance for this service is mandatory and in the event the recipient is not able to attend on the designated date, the chairperson of the scholarship committee must be notified and accommodations will be made to present the recipient with his/her check at a future church service chosen by the recipient.

In addition, each recipient will be asked to address the congregation with a short statement concerning their status in school, what school he/she is attending, what they plan to use the scholarship money for, etc.

ADDENDUM: (Effective June, 2014)

Addendum I: If an applicant wishes to have his/her application considered for a Victoria Panold Scholarship, his/her application must be at the church office no later than the application deadline. No exceptions will be made. Applications are available several months prior to the deadline.

Addendum II: All scholarship checks must be cashed within sixty (60) days of receipt, otherwise, the money will be returned to the scholarship fund for the following year.

ADDENDUM: (Effective June, 2015)

Applicants shall only receive a scholarship award for a maximum of four (4) years.