

THE JOHN HOWARD BLAKE MEMORIAL SCHOLARSHIP FUND

The John Howard Blake Memorial Scholarship Fund was established by Peggy and Howard Blake, former General Pastor of South Texas Presbytery. It is in memory of their son, John, who was tragically killed in an automobile accident while serving in the United States Marine Corps in North Carolina.

CURRENT GUIDELINES FOR THE ADMINISTRATION OF THE JOHN HOWARD BLAKE MEMORIAL SCHOLARSHIP FUND

1. That the proceeds of the Fund be used as a scholarship for the education of a Christian of Hispanic American origin, preferably, but not necessarily, a Presbyterian residing within the bounds of Mission Presbytery.
2. That it be for education above the high school level;
3. That real financial need count heavily in awarding the scholarship;
4. That a college student, or a student studying for a profession, or in an advanced technical school be equally eligible for the scholarship;
5. That all Hispanic churches of Mission Presbytery be notified of this scholarship each year that it is available.
6. That all applicants should request, in writing, the application forms from Presbytery.
7. That an individual who is a member of the Presbyterian Church (U.S.A.) be endorsed by his or her Session.
8. That a copy of the financial aid request form, submitted to the educational institution by the student be presented that includes a financial statement indicating all resources available to the individual;
9. That an individual who wishes to continue receiving the scholarship needs to re-apply every year for consideration;
10. That the money be distributed through the office of Mission Presbytery or its successor upon validation by the Hispanic Ministries Council.

CHECKLIST FOR STUDENTS APPLYING FOR J.H. BLAKE SCHOLARSHIP

To ensure that you have complied with applicable guidelines and have submitted documentation containing information essential in determining your eligibility for financial assistance, please answer the following questions in the affirmative, if applicable:

- | | <u>YES</u> |
|---|------------|
| 1. Are you a Christian of Hispanic American origin? | () |
| 2. Are you a Presbyterian residing within the bounds of Mission Presbytery? | () |
| 3. If you are a member of the Presbyterian Church (USA), did you include a letter in which the Session of your church endorsed you? | () |
| 4. If you are not a member of the Presbyterian Church (USA) complete the Pastor/Session Endorsement form | () |
| 5. Are you or will you be (check one as applicable) | |
| a. A college student? | () |
| b. A student studying for a profession? | () |
| c. A student studying in an advanced technical school? | () |
| 6. Do you feel that you have real financial need for the scholarship requested? | () |
| 7. Did you use the application form furnished by Mission Presbytery? | () |
| 8. Did you submit a copy of the Financial Aid request form submitted to the educational institution you wish to attend? | () |
| 9. Did you submit three (3) letters of recommendation? | () |
| 10. Did you complete the " <u>Supplemental Questionnaire</u> "? | () |
| 11. Did you submit the <u>Pastor/Session Endorsement Form</u> ? | () |
| 12. Did you provide the complete mailing address of the Financial Office of the institution you will attend? | () |

Please check all guidelines carefully.

Mail **complete** application to: Hispanic Ministry Council
Mission Presbytery
7201 Broadway, Suite 303
San Antonio, TX 78209

**Application form to be submitted by applicant to: Hispanic Ministries Council (HMC), Mission Presbytery, 7201 Broadway, # 303, San Antonio, Texas, 78209 / 210-826-3296 or 1-800-683-9999.
 Deadlines to apply are MAY 15, 2009 and OCOTBER 18, 2009.**

Name of Applicant _____ Social Security Number _____

Address Number and Street _____ City _____ State _____ Zip _____

Date of Birth – Mth/Day/Year _____ Place of Birth – City and State _____

Phone with Area Code _____ E-mail address _____

Church Name _____ City _____

Name of Clerk of Session _____ Phone number with Area Code _____

Education:

Current High School/College/University _____ Current Grade Level _____

Degrees _____ Occupational or Professional Goal _____

Educational institution you plan to attend _____ \$ _____
 Amount being requested

Address – Financial Aide Office _____ City _____ State _____ Zip _____

Personal Statement by Applicant: _____

Referrals: Provide the names and phone number with area code of three personal references other than relatives. These references **must** supply the **HMC** with a **brief written statement** sharing their estimation of you, and of your active role in the church.

**** These statements must be submitted with your application.***

If the referral letters are in Spanish submit the original letter and a translation into English.

1. _____ / _____
2. _____ / _____
3. _____ / _____

Signature _____ Date _____

**JOHN H. BLAKE SCHOLARSHIP
SUPPLEMENTAL QUESTIONNAIRE**
This form must be submitted with Application

FAMILY GENERAL INFORMATION:

Applicant's Marital Status: Single ____ Married ____ Divorced - ____ Separated - ____

If married, spouse's full name _____ # of Dependents _____

Parent's Names _____

Parent's current status: Married - ____ Divorced - ____ Separated - ____ Widowed - ____ Deceased ____

Parent's Address _____

Number of children at home _____ Ages ____/____/____/____/____/____/____/____

ASSETS: (Estimate if unsure of actual value(s) and/or balance(s))

Home – current appraised value _____ (Renters, indicate -0-)

Cash, checking and savings accounts:

Current Balances:	Cash	\$ _____
	Checking	\$ _____
	Savings	\$ _____

Real Estate (other than home) and other investments:

Current Appraised Value:	Real Estate	\$ _____
	Investments	\$ _____

LIABILITIES:

Home Mortgage – Monthly payment \$ _____

Other major outstanding liabilities:

	<u>Principal</u>	<u>Monthly Payments</u>
Auto Loan	_____	\$ _____
Medical bills	_____	\$ _____
Other loans	_____	\$ _____

Major expenses anticipated in 2006

<u>Type</u>	<u>Amount</u>	<u>Remarks</u>
_____	\$ _____	_____
_____	\$ _____	_____

INCOME:

Family Gross Income for 2006 (estimates)

Current Salaries:

Father	\$ _____	Mthly/Yearly
Mother	\$ _____	Mthly/Yearly
Student – Applicant	\$ _____	Mthly/Yearly

Other Sources if Income and Support:

<u>Type</u>	<u>Amount</u>	<u>Remarks</u>
Scholarship(s)	\$ _____	_____
Grant(s)	\$ _____	_____
Loan(s)	\$ _____	_____
Other	\$ _____	_____

MONTHLY EXPENSES:

Food	\$ _____
Clothing	\$ _____
Utilities	\$ _____
Transportation	\$ _____
Child Care	\$ _____

SCHOLARSHIP REQUEST:

Amount requested for 2006/2007 school year \$ _____

Scholarship requested will primarily be used to pay:

Tuition and fees	_____	Books	_____
Living Expenses	_____	Other	_____

If and when enrolled, will you be:

- a) A full-time student taking 12 or more credit hours ()
- b) A part-time student taking less than 12 credit hours ()
- c) If you were a recipient in 2005, please send a copy of your transcript ()

You may submit a copy of the following as proof of your income:

***W-2 Wage and Tax Statement
IRS tax forms
Social Security Administration - SSA-1099***

Other information asked for on other financial aid forms that you may want to include:

*Citizenship/Alien Status
Driver's License #
Lives alone or w/parents or dormitory*

Pastor/Session Endorsement

Date _____

Church name

Church address

City State Zip code

John H. Blake Scholarship Selection Committee:

_____ is active in the life of our congregation and is a person who would be a good representative and example for others. He/She is recommended to receive this scholarship and we appreciate any financial assistance that may be granted.

Printed name of Pastor/Moderator

Printed name of Clerk of Session

Signature of Pastor/Moderator

Signature of Clerk of Session