

# **UNITED CHIOS SOCIETIES OF BALTIMORE SCHOLARSHIP APPLICATION**

The following form has been prepared to assist you  
with the preparation of your application.

**Incomplete or inaccurate information will be cause for disqualification.**

We hope to be able to commemorate Agia Markella during church services at  
**Saints Mary Magdalene and Markella Greek Orthodox Church**  
**3719 Dublin Road**  
**Darlington, MD 21034**

**Sunday, July 19, 2020**

**At which time we ask recipients or their representative  
be present during church services for the distribution of scholarships.  
If we are unable to meet as a congregation the scholarship will be mailed to  
the address you have designated in your application.**

## **CHECK LIST**

- \_\_\_\_\_ Personal information thoroughly completed
- \_\_\_\_\_ Scholastic information completed
- \_\_\_\_\_ Your most recent transcript with official authorization from your  
high school or college
- \_\_\_\_\_ Two letters of recommendation
- \_\_\_\_\_ Photo (optional)

The United Chios Societies of Baltimore awards scholarships to qualified candidates  
of the Greek/American community. Selection is based on academic achievement  
and financial need.

## **DO NOT RETURN TO CHURCH OFFICE**

**All forms must be received at**  
**200 Cross Keys Road #37**  
**Baltimore, MD 21210**  
**By Wednesday, July 8, 2020**  
**Good Luck**

# UNITED CHIOS SOCIETIES OF BALTIMORE

Your completed application must be returned by mail to the  
United Chios Societies of Baltimore

200 Cross Keys Road #37, Baltimore, MD 21210

**NO LATER THAN JULY 8, 2020**

Please attach a recent photo and two letters of recommendation.

## PLEASE PRINT

1. Applicant's full name: \_\_\_\_\_  

last
first
middle
2. Home Address: \_\_\_\_\_  

no.
street
apt#

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city/county
state
zip code
3. Phone Numbers: \_\_\_\_\_  

land line/home
(include area codes)
cell
4. E-mail \_\_\_\_\_
5. Birth date: \_\_\_\_\_ Birthplace: \_\_\_\_\_  

m
d
y
city
state
country
6. Sex: M/F 7. Marital Status: Single \_\_\_\_\_, Married \_\_\_\_\_ Divorced \_\_\_\_\_
8. Are you a United States citizen? \_\_\_\_\_ If No, state where. \_\_\_\_\_
9. Father's or Guardian's name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 Mother's or Guardian's name: \_\_\_\_\_ Occupation: \_\_\_\_\_
10. Name of high school/college attended and dates.  

Names	Dates
11. List your high school or college extracurricular activities:  


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# UNITED CHIOS SOCIETIES OF BALTIMORE

12. List membership in clubs or associations you have participated.

Church

Responsibility

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13. List your involvement in volunteer services and state to what capacity.

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14. Approximate academic rank in your high school graduating class. \_\_\_\_\_

Approximate academic rank in your college class (if applicable). \_\_\_\_\_

15. What is your current GPA? \_\_\_\_\_

16. Name of college or university where you have been accepted or are enrolled. \_\_\_\_\_ Annual tuition \$ \_\_\_\_\_

17. What is your designated major? \_\_\_\_\_

18. What are your vocational objectives?

1<sup>st</sup> choice \_\_\_\_\_

2<sup>nd</sup> choice \_\_\_\_\_

3<sup>rd</sup> choice \_\_\_\_\_

19. List any institutions of higher learning you are or have attended.

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20. What are the total expected expenses for your next (first) year of college?

\$ \_\_\_\_\_

# UNITED CHIOS SOCIETES OF BALTIMORE

21. To what extent are your parents able to cover your college expenses?

Tuition \_\_\_\_\_, Room & Board \_\_\_\_\_, Books & Supplies \_\_\_\_\_,  
Transportation \_\_\_\_\_

22. State the combined annual parental income. \$ \_\_\_\_\_

State your annual income. \$ \_\_\_\_\_

23. Please total your estimated college expenses for one year.

A. Tuition \$ \_\_\_\_\_

B. Books \_\_\_\_\_

C. Room & Board \_\_\_\_\_

D. Transportation \_\_\_\_\_

E. Other \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

24. Estimated Resources for next school year:

A. Family help \$ \_\_\_\_\_

B. Employment \_\_\_\_\_

C. Savings \_\_\_\_\_

D. Loans \_\_\_\_\_

E. Other \_\_\_\_\_

TOTAL\$ \_\_\_\_\_

25. Have you received any scholarships or grants to date? \_\_\_\_ yes, \_\_\_\_ no

If yes, what was the amount \$ \_\_\_\_\_ and from whom? \_\_\_\_\_

# UNTIED CHIOS SOCIETIES OF BALTIMORE

26. How do you expect to spend the scholarship money if it is awarded to you?

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27. Please cite any special considerations that would help the committee in making a decision in your favor.

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**Incomplete applications or inaccurate information  
will automatically result in disqualification.**

Please use the other side of this paper if you need more space.

I \_\_\_\_\_ solemnly declare that the  
information provided in this application is true and accurate.

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

All the information in this application will remain confidential.

# UNITED CHIOS SOCIETIES OF BALTIMORE

## Scholarship Application

\_\_\_\_\_  
DATE

The student named below is applying for a scholarship. The qualifications are based on academics and financial need. Please fill in the information requested and return to the scholarship committee at 200 Cross Keys Road, #37, Baltimore, MD 21210 by July 8, 2020. Your cooperation is appreciated.

Student's Name:

\_\_\_\_\_  
last

\_\_\_\_\_  
first

\_\_\_\_\_  
middle

Student's Address:

\_\_\_\_\_  
number

\_\_\_\_\_  
street

\_\_\_\_\_  
city

\_\_\_\_\_  
state

\_\_\_\_\_  
zip code

School Name:

\_\_\_\_\_  
yr. graduated (H.S.) \_\_\_\_\_ yr. of col: \_\_\_\_\_

School Address:

\_\_\_\_\_  
number

\_\_\_\_\_  
street

\_\_\_\_\_  
city

\_\_\_\_\_  
state

\_\_\_\_\_  
zip code

Applicant's Numerical Rank in Class: \_\_\_\_\_ Number of students in Class: \_\_\_\_\_

Applicant's GPA: \_\_\_\_\_ SAT Scores (H.S.) \_\_\_\_\_

Please attach a copy of the most recent transcript.

General Aptitude for College Level Achievement

Above Average \_\_\_\_\_ Average \_\_\_\_\_ Below Average \_\_\_\_\_

Please indicate achievement in special study areas (math/science, humanities, the arts, technology, etc.) \_\_\_\_\_

Would you recommend the applicant for post high school or collegiate studies?

Highly recommend \_\_\_\_\_, Recommend \_\_\_\_\_, Do not recommend \_\_\_\_\_ I certify that the information provided herein is accurate and authentic.

\_\_\_\_\_  
signature of school official

\_\_\_\_\_  
title

\_\_\_\_\_  
date