# THE PATRICIA ANN JACKSON MEMORIAL SCHOLARSHIP FUND

Extending a student's education, one student at a time!



# Application

Gillis Memorial Christian Community Church 4016 Park Heights Avenue Baltimore, Maryland 21215 410.466.2800

> Rev. Dr. Theodore C. Jackson, Jr. Pastor Emeritus

### BACKGROUND INFORMATION

The Patricia Ann Jackson Memorial Scholarship Fund of Gillis Memorial Christian Community Church established on Friday, May 21, 1999. organizers-Vivian E. Jackson, Shirley Johnson, Yvonne Jones and Willie Henry-wanted to All applicants must: establish a scholarship fund that would be awarded yearly to an eligible 12th grade student who is a member of the Gillis Memorial Christian Community Church Family. What an 📚 extraordinary way to commemorate Pat's service and love for the Baltimore City Public School System and the Gillis Memorial Christian Community Church.

Patricia Ann Jackson, January 31, 1951 – May 20, 1999, devoted her life to children, families and the community. She graduated from Western High School and received degrees from the Community College of Baltimore, Morgan University, Coppin State College and Loyola College. Her career with the Baltimore City Public School System began in 1974 at Belmont Elementary School. In 1995, Pat was appointed Master Teacher at Bay Brook 📚 Elementary. After completing the Aspiring Leaders Program through Loyola College, Pat 📚 was appointed Assistant Principal at Bay Brook She was goal oriented and Elementary. innovative. Her remarkable human relations skills enabled her to work successfully with staff, students and parents. She really loved people and sought to help them. She loved God and lived a life that was pleasing to Him.

### SCHOLARSHIP ELIGIBILITY

Any graduating high school senior planning to attend an accredited institution of higher education or a full-time undergraduate is eligible to apply for the scholarship. applicants must be a member of Gillis Memorial Christian Community Church

and participate in Bible study, an auxiliary and/or activities for at least one year. In addition, applicants must provide all the requested information listed below.

### The **HOW TO APPLY**

- **Complete** the Patricia Ann Jackson Memorial Scholarship Fund application.
- Submit a complete official high school transcript with the application.
- Write a personal statement (250 words or more) describing your interest and involvement in the following: school activities, church, community and public service activities, hobbies, special talents, and career goals.
- Submit two letters of recommendation. (One recommendation from a school representative and one from a church representative.)
- Submit your most recent photograph.
- Forward the application and supporting materials to The Patricia Ann Jackson Memorial Scholarship Fund of Gillis Memorial Christian Community Church (PAJ Memorial Scholarship Fund of GMCCC). Mail application to:

Gillis Memorial C.C. Church c/o Scholarship Fund 4016 Park Heights Avenue Baltimore, Maryland 21215

\*Candidate score sheet available upon request.

### APPLICATION DEADLINE

June 30th

## The Patricia Ann Jackson Memorial Scholarship Fund Application

PART A: PERSONAL DAT	TA	
Full Name:	Social Security Number:_	
Permanent Address:		
City, State, Zip:		
Telephone Number:		
Present Address (if different from abo	ve):	
City, State, Zip:		
Telephone Number:		
Place of Birth:	Date of Birth (Month/Day/Year):	
Please Circle: Male	Female	
Father/Guardian's Name:		
Mother/Guardian's Name:		
PART B: ACADEMIC REC	CORD	
I. List the school(s) you have att	rended.	
H. 1 C 1 1	T	
High School	Location	Graduation Date
High School	Location	Graduation Date
II. List the school(s) to which you accredited college or university	u have applied. Scholarship applicants y.	must gain admission to an
School	Location	
School	Location	
Once accepted, applicant must send a cop they are currently attending to the PAJ Me		cial transcripts from the school
III. List your major field of study.		
Major:		

IV.	List any church auxiliaries or activities you are a member of or have participated in for at least a year.					
V.	List any Academic Honors, Scholarships, Special Awards or Certificates:					
VI.	Describe your extracurricular activities:					
PAR		BUDGET FOR THE ACADEMIC YEAR	٦			
	mation to complete this section may be attended as possible. Your award will be determined as possible.	obtained from the school to which you are applying nined by the accuracy of this information.	Please be as			
I.	Available Funds					
	Grants	\$				
	Loans	\$				
	Parent's Contribution	\$				
	Summer Earnings	\$				
	Other Sources of Income	\$				
	Total Available Funds	\$				
II.	Anticipated Expenses					
	Tuition	\$				
	Fees	\$				
	Room & Board	\$				
	Personal Expenses	\$				
	Books & Supplies	\$				
	Transportation	\$				
	Other	\$				
	Total Anticipated Expenses	\$				

III.	<u>Total</u>					
		able Funds (from above)	\$			
		s Total Anticipated Expenses (from above)	\$			
	Total	Financial Need	\$			
<b>⇒</b> N	lote:	All applicants are encouraged to apply for fin	ancial assistance wi	th other	organizations.	
PAR	T D:	FINANCIAL BACKGROUND				
This s ble.	ection mu	ast be completed by the applicant. This information	is confidential. Plea	se be as a	ccurate as poss	
I.	Paren	tal Assistance				
	(A)	What was the taxable income of your parent(s)/guardian for the previous year? (This figure must be taken from the IRS tax return).				
	(B)	Will your parent(s)/guardian(s) be able to as If yes, by how much?	sist you financially	during tl	ne school year	
II.	Perso	nal Assistance				
	(A)	Do you have any savings that could be used how much?	d toward your educ	cation thi	is year? If ye	
	(B)	How much will you earn for school during th	ne summer?			
	(C)	How many dependents, other than yourself, are your parents supporting? Please provide their <u>names and ages</u> . If any of the dependents are in colleges, please indicate below.				
		Dependent 1:	In College:	yes	no	
		Dependent 2:	In College:	yes	no	
		Dependent 3:	In College:	yes	no	
		Dependent 4:	In College:	ves	no	

III.

III.	Other	Other Assistance		
(A) Have you ever received other scholarships or loans? If yes, please provide the scholarship or loan, the date received and the amount.				
		Name:	Amount:	Date:
	(B)	ner form of financial assistance		
		Month/Day/Year:		
	(C)	Date Federal Financial Aid Form was filed:		
Month/Day/Year:				
	(D) Will you receive any other financial assistance? If yes, by how much?			
PART	E:	CERTIFICATION		
I hereb	y certify	y that all the information in	n this application is accurate and	correct.
Applica	ınt's Sig	gnature:		Date:
Parent/	Guard	ian's Signature:		Date: