

## NORTHSIDE CHURCH EDUCATIONAL GIFT FUND

The Northside Church Educational Gift Fund provides money to assist students who wish to pursue a continuing education. These funds are not limited to college education alone but can also be awarded for technical or trade schools, retraining for displaced workers, or any other training designed to further the education of the recipient.

### GUIDELINES FOR THE EDUCATIONAL GIFT FUND

\*Financial support will be awarded on the basis of need for those who might not otherwise be able to attend an institution of continuing education.

\*Each applicant must provide a copy of their registration and class schedule. A copy of their transcript must also be submitted or a copy of the applicant's ACT/ SAT score if applying for first semester of college.

\*In addition, two letters of reference, one from the applicant's pastor and the other from a teacher, employer or non-relative, are required.

\*The Educational Gift Fund will be awarded primarily to individuals who attend Northside Church, but other individuals are not excluded.

\*Federal guidelines for financial aid prohibit any student from receiving more total dollars from all sources than necessary to meet student expenses. These funds will be distributed so that federal law is not violated.

\*The Education Gift Fund will not be able to cover all educational costs. Our funds are intended to supplement your earnings, Pell Grants, scholarships, government loans, and contributions from parents and others.

You are strongly encouraged to apply for other sources of funding for your college education or other continuing education. Applicants who have already sought other sources of funding will be considered first.

The deadline for submitting an application to the Educational Gift Fund will be July 1st.

**Scholarships will be awarded annually.**

Place completed application, along with other required documents, in an envelope and place it in the Education Gift Fund mailbox in the church office or mail to:

Northside Church  
ATTN: Education Gift Fund  
2571 North Highland Avenue  
Jackson, TN 38305

If you would like to email your application, please call the church office to get appropriate email address to send it to. Please contact the church office with any questions: 731-668-0617

## NORTHSIDE CHURCH GIFT FUND APPLICATION

First Name \_\_\_\_\_ Last name \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Sex: M \_\_\_ F \_\_\_ Birth Date: \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Your Church/ Pastor's name \_\_\_\_\_

### EDUCATIONAL INFORMATION

Name of College or Institution \_\_\_\_\_

Full-time student \_\_\_ Part-time student \_\_\_ Planned major \_\_\_\_\_

Vocational training \_\_\_ Undergraduate \_\_\_ Graduate level \_\_\_ Other \_\_\_\_\_

Housing: Campus housing \_\_\_ Live with family \_\_\_ Off campus \_\_\_

Current GPA \_\_\_\_\_ ACT (Entering Freshman) \_\_\_\_\_ SAT \_\_\_\_\_

Expected Month/ Year of Graduation \_\_\_\_\_ Planned vocation \_\_\_\_\_

### FINANCIAL INFORMATION

#### EXPECTED COST/ ACADEMIC YEAR

Tuition	_____
Books	_____
Room/Board	_____
Transportation	_____
Other	_____
TOTAL	_____

AVAILABLE INCOME/ ACADEMIC YEAR

Scholarships \_\_\_\_\_  
Financial Aid/ Grants \_\_\_\_\_  
Expected Family Contribution \_\_\_\_\_  
Other \_\_\_\_\_  
TOTAL \_\_\_\_\_

STUDENTS ANNUAL INCOME \_\_\_\_\_

Please summarize the steps you have taken to meet your anticipated expenses, including applying for scholarships, grants and other forms of financial aid, part-time or full-time employment, etc. You may attach a separate sheet of paper if needed.

Briefly detail your financial need, noting any circumstances which relate to financial hardships.

Please summarize your career goals. What do you plan to do with your education?



The Education Gift Fund Team will hold all application information in confidence.

The following documents must accompany your application for it to be considered:

- \_\_\_\_\_ Copy of transcript or ACT/ SAT if incoming Freshman
- \_\_\_\_\_ Copy of registration and class schedule
- \_\_\_\_\_ Two letters of recommendation- One from pastor and other from teacher, employer or non-relative

Please sign and date verifying that the information you have submitted is true, accurate and complete.

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