



For more than twenty years, ***FAITH: An Endowment for Orthodoxy and Hellenism*** has been pleased to sponsor a series of merit-based FAITH Scholarships for Academic Excellence for young people of Hellenic descent and/or Greek Orthodox faith. Please carefully read the criteria and requirement details. The enclosed application must be filled out by the applicant and submitted in its entirety. All required documentation must be included with your submission (see checklist on page 3). Incomplete applications will not be considered.

CRITERIA FOR ELIGIBILITY

- Candidate must be a U.S. citizen and permanently reside in the United States. If a permanent resident, proof is required.
- Candidate must be a high school senior graduating from accredited public, private or parochial high school in the United States of America, and embarking to study in an undergraduate degree program in the fall of 2025 at a 4-year accredited college or university in the United States.
- Candidate must be a member of a Greek Orthodox parish.
- All applications must be postmarked by **June 24th, 2025**. Applications postmarked after this date will be marked late. Applications may be submitted at any time prior to deadline. Note that we will send an email confirmation that your application has been received. If you do not receive an email confirmation from us by July 15th, 2025, please contact our office at (212) 803-9363 or info@thefaithendowment.org. It is the applicant's responsibility to contact our office if you do not receive confirmation.

REQUIREMENT DETAILS ***Please do not staple any items.***

- **Complete academic records**, including an official transcript and copies of **all** applicable SAT, ACT, SAT Tests and/or AP exam testing records. The official transcript must include Spring 2025 semester grades. If spring grades are not finalized by the time of submission, please send latest available transcript along with an unofficial report card/progress report of Spring 2025 grades. If you are planning to submit 2025 AP scores, confirm in Section II (page 5) that you will email a copy of scores when available. Contact (212) 803-9363 or info@thefaithendowment.org for any questions.
- A copy or transcript of applicant's **Baptismal or Chrismation Certificate**. **NO EXCEPTIONS.**
- **A resume** listing your extracurricular activities, school activities, volunteer work, internship and work experiences, leadership roles and/or church activities, etc.
- **Responses to essay prompts**. Thoughtfully answer each prompt listed in Section III (page 5). Please include on a separate page. Recommended length: 100-150 words per prompt.
- **Two (2) letters of recommendation**. Please choose individuals that best represent the important aspects of your accomplishments and provide us with a true picture of your background. Recommenders must fill out the recommendation forms (see pages 8 and 9), enclose both the recommendation letter and filled out form in a signed or sealed envelope or email directly to us. You may also enclose the signed and sealed envelopes in your application packet. We recommend contacting recommenders early to ensure they have time to write a letter by the deadline.
Recommendations must come from each category of individuals listed below:
 - Academic – from a teacher, advisor, or program director at your high school
 - Religious/Spiritual – from a priest or youth director at your parish

- Candidate must enclose a copy of the **letter confirming acceptance** and planned matriculation at an undergraduate college or university.
- **(OPTIONAL)** FAITH Scholarships for Academic Excellence are awarded on a merit basis. Applicants have the option to include the financial documents detailed below if they would like to be considered for **additional financial need-based funds**. If you would like to be considered for these additional funds, please submit the following documents:
 - **Filled out Section VII (page 7) of the application.** In calculation of expenses, detail by type: tuition, books, fees, room, board, transport, etc., and outline sources of financial funding and support by listing all financial aid: loans, scholarships, grants, assistance from parents and/or others.
 - **A copy of the financial aid package** provided to the student by the university.
 - **A breakdown of annual gross income and expenses for 2024.** This schedule should show all sources of income received to meet your annual living expenses. Please contact our office at (212) 803-9363 or info@thefaithendowment.org if you need an example.
 - **Copies of your 1040 tax forms for the last three years (full tax return for 2024 and first two pages from 2023 and 2022).** In circumstances of any reported income or loss on the schedule of gross income and expenses or on Form 1040 from a corporation, limited liability company, partnership or trust, you must supply a copy of any such entity's income tax return (Form 1120, 1065 or 1041) along with such entity's financial statements prepared by its accountant. In circumstances of divorce, applicants must provide copies of both parents' tax returns. If necessary, please submit a statement explaining any extenuating circumstances. **Please be sure to block out all social security numbers.**
 - If applicable, include a personal statement with an explanation of any special/extenuating circumstances.
- In the event that the candidate graduated high school in 2024 and participated in a gap year, the candidate must provide a statement that includes how and where they spent the gap year and provide reasons and objectives for taking the gap year. Candidate must include two additional references that confirm their statement.
- If necessary, the candidate should be available for a telephone interview at the Committee's discretion. Late submissions or incomplete packets will not be accepted nor considered by the Committee. All applications must be received by mail.

Please mail complete application to: **FAITH Endowment**
Attn: FSAE
499 Park Avenue, 23rd Floor
New York, NY 10022
 Telephone: 212-803-9363

Scholarship application packets must postmarked by June 24th, 2025

Applicants will be notified of Review Committee's decision September 2025

Name: _____

CHECKLIST: Please include completed checklist with application

Please do not staple any items. Please review and fill out the following application checklist carefully and enclose it in your application packet. **All of the checklist items (excluding recommendation letters or academic transcripts which may be sent separately) must be included in your application packet** for proper processing of your application. When complete, please mail your application to: *FAITH Endowment, Attn: FSAE, 499 Park Avenue, 23rd Floor, New York, NY 10022*. Your application packet must be postmarked by **June 24th, 2025**. Applications postmarked after this date will be marked late. Incomplete applications will not be processed or considered. For any questions, please email info@thefaithendowment.org or call (212) 803-9363. Note that we will send an email confirmation that your application has been received. If you do not receive an email confirmation from us by July 15th, 2025, please contact our office.

- ☐ My application is completely filled out with a signed Authorization and Certification Form
- ☐ I have enclosed an official sealed academic transcripts that includes my Spring 2025 grades or, if my final transcript is not available, I have enclosed my latest available transcript with an unofficial report card/progress report of my Spring 2025 grades.
- ☐ I have enclosed copies of testing records for AP, SAT and/or ACT tests and have not omitted any scores.
- ☐ I have enclosed my resume
- ☐ I have enclosed my application essay
- ☐ I have enclosed or contacted my two recommenders to provide letters of recommendation
- ☐ I have enclosed a copy or transcript of my Baptismal or Chrismation Certificate
- ☐ I have enclosed a copy of the letter of acceptance from the undergraduate school I will be attending
- ☐ **(Optional)** Leave blank if not applicable
 - I would like to be considered for additional financial need-based allocations and have submitted:
 - ☐ Filled out Section VII (page 7) of the application
 - ☐ A copy of the financial aid package provided by my university
 - ☐ A copy of my household's **full** 2024 Federal tax return and W-2s
 - ☐ The first 2 pages of my household's 2023 Federal income tax returns
 - ☐ The first 2 pages of my household's 2022 Federal income tax returns
 - ☐ A brief breakdown of annual gross income and expenses for 2023. This schedule should show all sources of income received to meet your annual living expenses. Please contact our office at info@thefaithendowment.org if you need an example.
 - ☐ If there is any reported income or loss on the schedule of gross income and expenses on Form 1040 from a corporation, limited liability company, partnership or trust, I have enclosed complete copies of the entity's income tax return (1120, 1065 or 1041) along with such entity's financial statements prepared by its accountant. In circumstances of divorce, applicants must provide copies of both parents' tax returns.
- ☐ I have completed and enclosed this completed checklist

APPLICANT'S INSTRUCTIONS

Information below must be completed by applicant. Please complete **all** sections of this application; **print clearly**; sign and return it together with **all required documents**. **Application must be postmarked by June 24th, 2025**. Submissions postmarked later than June 24th will be marked late. Incomplete applications will **not** be considered for an award.

Today's date: _____

I. PERSONAL INFORMATION

Name (First, Middle, Last): _____

Mailing Address (Street/P.O. Box): _____

City: _____ State: _____ Zip: _____ Years at Current Address: _____

Phone Number: _____ Email Address: _____

Date of Birth: _____ Place of Birth: _____ Age: _____

IA. EDUCATION - HIGH SCHOOL

Name of High School: _____ Type of School: ☐ Public ☐ Private ☐ Charter

School Address: _____

City: _____ State: _____ Zip: _____

Leave any space blank that does not apply (i.e. your school doesn't rank).

GPA: _____ points out of _____ points (i.e. 3.75 pts out of 4.0 pts) Weighted GPA: _____ points out of _____ points

Letter Grade Average: _____ Rank in Class: _____ out of _____

TRANSCRIPT:

Please enclose a **sealed official transcript** that includes Spring 2025 semester grades. If spring grades are not finalized by the time of submission, please send latest available transcript along with an unofficial report card/progress report of Spring 2025 grades. For any questions, call (212) 803-9363 or email info@thefaithendowment.org

☐ My transcript (which includes Spring 2025 semester grades) is enclosed

☐ My spring grades are not finalized so I have enclosed my latest available transcript along with a report card/progress report of my Spring 2025 grades.

IB. EDUCATION - UNIVERSITY

Name of Undergraduate University (must be an accredited 4-year institution): _____

City: _____ State: _____ Zip: _____

University Start Date: _____ Enrollment Status: ☐ Accepted for full-time study ☐ Waitlisted

Proposed Major: _____ Degree Program: _____

Name: _____

II. TEST SCORES AND DATES

Enter your ACT, SAT and AP Exam test dates and current highest scores earned if available. Leave any space blank that does not apply. Also list any planned test dates and indicate if you are planning to submit 2025 AP testing scores. If you have taken an exam more than once, record your highest score. For SAT use your best total score; reading and mathematics scores must be from the same sitting. **You must enclose copies of records of each score.**

SAT

Test Date	Scores
____ / ____ MO YR	____ Reading & Writing
____ Math	____ Total Score

ACT

Test Date	Scores
____ / ____ MO YR	____ English
____ Math	____ Reading
____ Science	____ Composite Score

AP Exams

If you are planning to submit the results of your 2025 AP scores, please (1) note and (2) email a copy of results to info@thefaithendowment.org when scores are released.

☐ I will be submitting additional AP scores in July

☐ I have no additional test scores to submit

Subject: _____ Date: _____ Score: _____

Subject: _____ Date: _____ Score: _____

Subject: _____ Date: _____ Score: _____

Subject: _____ Date: _____ Score: _____

Subject: _____ Date: _____ Score: _____

Subject: _____ Date: _____ Score: _____

III. APPLICATION ESSAY

On a separate page, please answer all of the following questions. *Recommended length: 100-150 words per prompt.*

- 1. FAITH Scholars display exceptional academic excellence and philanthropic-minded leadership. What is your proudest academic and/or personal achievement and why would you like to be part of the FAITH Scholar community?**
- 2. How will your university studies allow you to employ your talents and goals, build a career and contribute to society?**
- 3. Describe a person in the Hellenic community who has inspired you. How has this person influenced your life and/or service to your community?**
- 4. How has your Greek background influenced your approach to leadership within your education and community?**

I hereby confirm that I am the sole author of the enclosed answers.

Applicant Signature: _____ Date: _____

IV. RECOMMENDATIONS

Please indicate below the names and information of the individuals who will submit recommendations on your behalf: one from a Teacher or Academic Advisor and one from your Parish Priest/Youth Advisor.

Teacher or Academic Advisor Name: _____ Title _____ Contact: _____

Parish Priest or Youth Advisor Name: _____ Title _____ Contact: _____

Name: _____

V. ADDITIONAL PERSONAL INFORMATION

Are you a Greek Orthodox Christian? ☐ Yes ☐ No If No, specify: _____

Please indicate your citizenship status: ☐ US Citizen ☐ Permanent Resident

Is your family or are you a member of a parish? ☐ Yes ☐ No

Parish Name: _____ Metropolis: _____

Parish Address: _____

Parish Priest: _____ Telephone: _____

If not included in resume, please list parish organizations and years that you have been involved. Use extra paper if needed. _____

Have you ever received (or are you a candidate for) recognition of a submission to the St. John Chrysostom Oratorical Festival? ☐ Yes ☐ No

If Yes, which level: ☐ Parish ☐ Metropolis ☐ National Date: _____

Have you previously applied for a FAITH sponsored Scholarship/Grant? ☐ Yes ☐ No Name/Year(s) of Award: _____

If Yes, are you a previous recipient of any FAITH awards? _____

How did you hear about this scholarship? _____

Father's Name (First, Last): _____

Email Address: _____ Phone: _____

Address, City and State (If different): _____

Occupation: _____ Employer: _____ Number of Years: _____

Mother's Name (First, Last): _____

Email Address: _____ Phone: _____

Address, City and State (If different): _____

Occupation: _____ Employer: _____ Number of Years: _____

Parent Marital Status: ☐ Married/Remarried ☐ Single ☐ Divorced/Separated ☐ Widowed

Total Family Size **including yourself** (Number): _____

Please list the names and ages of any dependents (22 years of age and younger) in your household:

Name	Age	School Attending
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name: _____

VII. OPTIONAL FINANCIAL INFORMATION FOR SUPPLEMENTAL SCHOLARSHIP FUNDS

(Optional) All FAITH Scholars are selected on a merit basis, however applicants have the option to fill out the information below and submit financial documents to be considered for additional need-based allocations. **If you would like to be considered for these additional funds, please fill out this section and submit the following documents:** a copy of your financial aid package provided by your university, a brief breakdown of your household's gross income and expenses, and copies of your household's 1040 tax forms for the last three years (full tax return for 2024 and first two pages from 2 prior years). In circumstances of any reported income or loss on the schedule of gross income and expenses or on Form 1040 from a corporation, limited liability company, partnership or trust, you must supply a copy of any such entity's income tax return (Form 1120, 1065 or 1041) along with such entity's financial statements prepared by its accountant. In circumstances of divorce, applicants must provide copies of both parents' tax returns.

A. HOUSEHOLD GROSS ANNUAL INCOME

2024: \$ _____ Estimated income for 2025: \$ _____
2023: \$ _____
2022: \$ _____

List all supplemental funds (and sources) you and your family have saved to attend college/university:

B. BUDGET FOR 2025-26

SOURCE OF FINANCIAL SUPPORT

Student Loans	\$ _____	.00	
Institutional Scholarships	\$ _____	.00	
Non-Institutional Scholarships	\$ _____	.00	Specify Source: _____
Government Grants	\$ _____	.00	
Other Financial Aid	\$ _____	.00	Specify Source: _____
Supplemental Funds*	\$ _____	.00	Specify Source: _____

*All sources of financial assistance including, but not limited to, all family assistance, student trusts or 529 plans.

RESOURCE TOTAL \$ _____ .00

CALCULATION OF EXPENSES

Tuition	\$ _____	.00	
Room	\$ _____	.00	
Board	\$ _____	.00	
Books	\$ _____	.00	
Transportation	\$ _____	.00	
Laboratory Fees	\$ _____	.00	
Other Expense	\$ _____	.00	Specify Expense(s): _____
EXPENSE TOTAL	\$ _____	.00	

Name of Applicant: _____ Date: _____

Recommender's Name: _____ Title: _____

Address: _____

Telephone: _____ Email: _____

How long have you known the applicant? _____ In what capacity? _____

From your experience, how would you rate this applicant in terms of the following qualities:

	Excellent	Good	Average	Needs Improvement	No basis for evaluation/ Not applicable
Academic interest and motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative, original thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of integrity and personal responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays maturity and respect towards others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works cooperatively in a group setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/> >90%	<input type="checkbox"/> 75-90%	<input type="checkbox"/> 50-75%	<input type="checkbox"/> <50%	<input type="checkbox"/>

Please include a statement below, or include as an attachment, on why you believe the applicant should be considered for the FAITH Scholarship for Academic Excellence. Please use this opportunity to also further explain the ratings you gave concerning the applicant's academic interest and motivation, intellectual ability and creative, original thought.

Signature: _____ Date: _____

Instructions for Recommender: Please email copy of filled-out recommendation form and letter to info@thefaithendowment.org or mail in a sealed and signed envelope by June 24th, 2025. Mailing Address: FAITH Endowment, Attn: FSAE, 499 Park Avenue, 23rd Floor, New York, NY 10022. For questions, tele: (212) 803-9363.



FAITH
An Endowment for
Orthodoxy & Hellenism

FAITH SCHOLARSHIPS FOR
ACADEMIC EXCELLENCE
2025 RECOMMENDATION FORM

Name of Applicant: _____ Date: _____

Recommender's Name: _____ Title: _____

Address: _____

Telephone: _____ Email: _____

How long have you known the applicant? _____ In what capacity? _____

From your experience, how would you rate this applicant in terms of the following qualities:

	Excellent	Good	Average	Needs Improvement	No basis for evaluation/ Not applicable
Academic interest and motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative, original thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of integrity and personal responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays maturity and respect towards others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works cooperatively in a group setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/> >90%	<input type="checkbox"/> 75-90%	<input type="checkbox"/> 50-75%	<input type="checkbox"/> <50%	<input type="checkbox"/>

Please include a statement below, or include as an attachment, on why you believe the applicant should be considered for the FAITH Scholarship for Academic Excellence. Please use this opportunity to also further explain the ratings you gave concerning the applicant's academic interest and motivation, intellectual ability and creative, original thought.

Signature: _____ Date: _____

Instructions for Recommender: Please email copy of filled-out recommendation form and letter to info@thefaithendowment.org or mail in a sealed and signed envelope by June 24th, 2025. Mailing Address: FAITH Endowment, Attn: FSAE, 499 Park Avenue, 23rd Floor, New York, NY 10022. For questions, tele: (212) 803-9363

AUTHORIZATION AND CERTIFICATION

I authorize the FAITH Endowment to release application information, including copies of my application to the FAITH Scholarship for Academic Excellence Committee (FSAEC) or agent thereof.

I agree to have FAITH and/or the FSAEC or agent thereof to verify any and all of the application information given, including pertinent personal and financial information. The FSAEC or agent thereof may contact my employer(s), references, as well as schools cited herein to substantiate this information.

If I am offered a scholarship, I understand I will need to provide my social security number in order to receive the scholarship.

I hereby certify that the information provided in this application is accurate and that I am the sole author of the application essay and all the attachments. I understand that if any information is found to be inaccurate or incomplete, the FSAEC will deny me an award.

If awarded the FAITH Scholarship for Academic Excellence, I authorize FAITH to publicize my being a recipient.

Signature of Applicant: _____ Date: _____

Signature of Parent / Guardian: _____ Date: _____

Send the completed application and all required documents to:

FAITH Endowment
Attn: FSAE
499 Park Avenue, 23rd Floor
New York, NY 10022

For additional inquiries, please call (212) 803-9363 or email info@thefaithendowment.org

APPLICATION MUST BE POSTMARKED BY June 24th, 2025