



ST. PETER'S CHURCH - FOUNDED 1768

# St. Peter's Church

115 ST. PETER'S STREET  
SALISBURY, MARYLAND 21801  
(410) 742-5118

## JOHN PATRICK REEVES SCHOLARSHIP GUIDELINES FOR AWARD IN YEAR 2023

- A. Choice of School: Accredited four-year college or university, or accredited two-year institution with matriculation to an accredited four-year college or university or graduate program at a college or university.
- B. Who May Apply: Members of Saint Peter's Church who have selected their college and have been accepted for admission as a *full-time* student.
- C. Qualifications: Demonstrated financial need and commitment to academic program.
- D. Nature of Award: Awards are made to be used in one academic year.
- E. How to Apply: Applications are available at St. Peter's Episcopal Church website [www.stpeterschurch.net](http://www.stpeterschurch.net) or from the Community Foundation of the Eastern Shore's website [www.cfes.org](http://www.cfes.org). Completed applications must be postmarked no later than July 31, 2023 to be eligible for assistance. An application is complete, and considered for a scholarship award, only when the following have been submitted to REEVES SCHOLARSHIP, St. Peter's Church, 115 St. Peter's St., Salisbury, MD 21801:
  - 1. A completed scholarship application.
  - 2. Official transcript of most recent institution.
  - 3. Letter of acceptance from college or university, or if already in school, evidence of continued enrollment (e.g. next semester class schedule).
  - 4. A signed paper giving the Committee permission to obtain financial aid information in regard to grants, loans, and scholarships (attached).
  - 5. Two letters of recommendation from non-family members (e.g., teacher, guidance counselor, employer, athletic coach, etc.)
  - 6. Applicant's checklist to be included in application – provided in packet.
- F. Notification: by August 15, 2023

- G. Remarks: If you are awarded a scholarship, you will be asked to sign an Acceptance Letter indicating you will abide by the following conditions:
1. Submit an official college transcript at the end of the academic year for which the scholarship was available.
  2. Notify the Community Foundation of any changes in plans, such as: interruption of attendance, transfer to another college or university, discontinuance of academic program, or the receipt of other scholarship or financial assistance.

**Policies:**

- A. Students must demonstrate both financial need and merit to be eligible for assistance. Among those students with comparable financial needs, merit factors including community involvement, academic achievement, and extracurricular activities will be considered.
- B. The “Last Dollar” award concept is the best way to maximize scholarship resources, meeting students’ remaining need after all other resources (family, federal, state and institutional) have been exhausted.
- C. Scholarship awards are exclusively applicable to tuition, fees and book expenses, and are paid directly to the school financial aid office for deposit to the student’s account.



## JOHN PATRICK REEVES SCHOLARSHIP APPLICATION

Student Name: \_\_\_\_\_  
Last First M.I.

Permanent Address: \_\_\_\_\_  
Street

City State Zip Code

Telephone #: \_( ) Cell # \_( )

Email: \_\_\_\_\_

How long have you been member of St. Peter's Church? \_\_\_\_\_

School of most recent degree: \_\_\_\_\_ Graduation date: \_\_\_\_\_  
Month/Year

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

University for which aid is requested: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Entrance Date: \_\_\_\_\_ Degree pursued: \_\_\_\_\_

**Extracurricular Activities:** (attach additional sheet if necessary). List all school activities in which you have participated (clubs, student government, sports, volunteer projects, etc).

Activity	# of years participated	Special Honors/Offices Held
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Church/Community Activities:** List all church and community activities in which you have participated.

Activity	# of years participated	Special Honors/Offices Held
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Work Experience:** List any paid work experience you have had.

Employer	Position	Date from & to (mo/yr)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Estimated Expenses** (*eligible for scholarship award*):

Tuition	\$ _____
Fees	_____
Books	_____
Other ineligible expenses (room, board, etc.)	_____
TOTAL	\$ _____

**Estimated Resources:** \$ \_\_\_\_\_

Parent Contribution	_____
Student Contribution	_____
Scholarships from other sources	_____
Federal Grants	_____
State Grants	_____
Work-study programs	_____
Educational Loans	_____
Other	_____

**Estimated Amount Needed:** \$ \_\_\_\_\_

***I certify that I am a legal resident of \_\_\_\_\_ County, State of \_\_\_\_\_, a member in good standing of St. Peter's Church, and all information on this form is true and complete to the best of my knowledge.***

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (*if student is not adult*)

\_\_\_\_\_  
Date

**FORM: PERMISSION TO OBTAIN FINANCIAL INFORMATION**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Name of College/University Attending:** \_\_\_\_\_

**Last 4 digits of Social Security #** \_\_\_\_\_

**I hereby authorize the above college/university I will attend to release information on financial aid awarded to me by them and/or from any other source to the Community Foundation of the Eastern Shore, Inc.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date