TRINITY UNITED CHURCH OF CHRIST SCHOLARSHIP AWARDS & GRADUATE RECOGNITION 400 West 95th Street Chicago, IL 60628 Rev. Dr. Otis Moss III, Senior Pastor Rev. Dr. Jeremiah A. Wright, Jr., Pastor Emeritus Frankie Wilson, Chair | applications@trinitychicago.org | 773 962 – 5650

Elsie Benita Haines Memorial Scholarship

(For Trinity United Church of Christ Members Only)

For students in the Hospitality Industry including Culinary Arts, Food Service Management, Restaurant and Hotel Management, Food Development, Food Stylist, Culinary Nutrition, Baking and Pastry Arts and Home Economics. Culinary certification applicants may apply:

Name:			
Address:			
City:	State:	Zip Code:	
Phone:	Can this number receive texts?	Yes	No
Email:			
College/University/School You Attend:			
Address:			
City:	State:	Zip Code: _	
Phone:	Ext	Yes	No
Email:			

Activities, Groups and Ministries You Are Affiliated with At Trinity:

(Use Attachments if Necessary)

Ministry	From	То	Chairperson
Ministry	From	То	Chairperson

Offices Held in Ministries at Trinity:

Title	From	То	Chairperson
Title	From	То	Chairperson

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Rev. Dr. Otis Moss III, Senior Pastor

Rev. Dr. Jeremiah A. Wright, Jr., Pastor Emeritus

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Applicants Must Submit:

- Current official school transcript
- 300 WORD essay: "My Pursuit of Education will enable me to help the African American community in adopting and maintaining a healthy lifestyle by..."
- One (1) letter of recommendation from college/university advisor or counselor
- Ministry/Community Service Verification Form
- Graduate Recognition Form (if applicable)

Checklist

- Current official school transcript
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- One (1) letter of recommendation from college/university advisor or counselor
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DEADLINE FOR SUBMISSION WEDNESDAY MAY 9, 2024, emailed to applications@trinitychicago.org.

To receive a scholarship from Trinity United Church of Christ, applicant or family representative **MUST** be present on Scholarship Sunday.

Thank you!

May God bless your efforts as you strive to "serve the Lord with gladness" being all that God created you to be!

Signature:	Date:
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Giving #: ______ Any Special Needs? ______