

TRINITY UNITED CHURCH OF CHRIST SCHOLARSHIP AWARDS & GRADUATE RECOGNITION

400 West 95<sup>th</sup> 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](mailto:applications@trinitychicago.org) ||773 962 – 5650

## Verification of Ministry/Community Service

Dear Ministry Chairperson or Director, Community Service Organization:

A member of your ministry or associated with your community organization has applied for a **Trinity United Church of Christ Scholarship/Award**. Please complete the information below to verify their participation in your organization. Please return this form to [applications@trinitychicago.org](mailto:applications@trinitychicago.org), **Attention: Scholarship Committee** for your ministry/ organization to Trinity United Church of Christ with the applicant's name in the header, no later than **May 9, 2024**.

(For Trinity United Church of Christ Members Only)

Name of Scholarship Applied for: \_\_\_\_\_

Applicant: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

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

Giving # \_\_\_\_\_ Special Needs? \_\_\_\_\_

Name of Ministry or Community Service Organization

Number of years the applicant has participated in Ministry/Organization? \_\_\_\_\_

Leadership position(s) the applicant has held:

Level of Participation:

Additional Comments: (use attachments if necessary)

---

---

---

---

---

---

---

---

---

---

Chairperson/Director/Coordinator Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_