

**Pennsylvania Koinonia Ecclesiastical Jurisdiction**  
**Church Of God In Christ**  
6401 Ogontz Avenue, Philadelphia, PA 19126  
**AUXILIARIES IN MINISTRY (A.I.M.) SCHOLARSHIP APPLICATION**

Date \_\_\_\_\_

Full Name: \_\_\_\_\_  
(first) (mi) (last)

Address: \_\_\_\_\_  
(Street) (Apt) (City) (State) (Zip)

---

Telephone#: \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Mother's Name \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

Father's Name \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

Names of Siblings

Age

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Church Affiliation:**

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

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

---

Pastor: \_\_\_\_\_

How long have you been a member? \_\_\_\_\_

In what groups/auxiliaries are you active? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Education:**

High School Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

When do you expect to graduate? \_\_\_\_\_

**Extra-Curricular Activities:**

To what groups/clubs do you belong?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What Interests do you have?

---

---

---

What awards have you received?

---

---

---

What is your Class Academic Average?

---

Names of colleges/universities to which you have applied:

---

---

---

Where have you accepted?

---

Where do you plan to go? \_\_\_\_\_

What Semester do you plan to start?

(Circle one): Fall 2021      Spring 2022      Other \_\_\_\_\_

What status do you plan to maintain? (Circle one)      Full Time      Part Time

\*\* (Full time status is considered as 12 credits or more)

**Financial Status:**

What percentage of support will your parents/guardian contribute to your education? \_\_\_\_\_%

What other sources of financial aid/scholarship have you applied/received?

---

---

---

**Personal References:** (See attached form)

Please include (3) personal references (at least one from your high school)

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_

4.) \_\_\_\_\_

**Pennsylvania Koinonia Ecclesiastical Jurisdiction**

Church Of God In Christ  
6401 Ogontz Avenue, Philadelphia, PA 19126

**AUXILIARIES IN MINISTRY (A.I.M.) SCHOLARSHIP APPLICATION**

**Personal Reference Form**

(This form can be copied)

**Name of Applicant:** \_\_\_\_\_

Current Address: City/State/Zip \_\_\_\_\_

Church Name: \_\_\_\_\_

Jurisdiction Name: \_\_\_\_\_

---

**Name of Evaluator:** \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_

Please evaluate the applicant in the following areas, using **Fair, Good or Excellent**  
(Please Circle your selection)

Character/Integrity	Fair	Good	Excellent
---------------------	------	------	-----------

Accountability	Fair	Good	Excellent
----------------	------	------	-----------

Maturity	Fair	Good	Excellent
----------	------	------	-----------

Ability to Succeed In Chosen Profession	Fair	Good	Excellent
--	------	------	-----------

Personal Comments/information you feel would help support this applicant in this  
Scholarship process.

---

---

---

**Pennsylvania Koinonia Ecclesiastical Jurisdiction**

Church Of God In Christ  
6401 Ogontz Avenue, Philadelphia, PA 19126

**AUXILIARIES IN MINISTRY (A.I.M.) SCHOLARSHIP APPLICATION**

**Scholarship Checklist**

- 1.) I am a High School Senior entering a school of higher learning  
In my graduating year
- 2.) I am a member of a church within the Pennsylvania Koinonia  
Jurisdiction COGIC
- 3.) Letter of recommendation from my Pastor is enclosed
- 4.) High School transcript in enclosed
- 5.) Scholarship application is completed in its entirety
- 6.) I have at least three Personal Reference Forms completed and  
Enclosed
- 7.) Essay has been spell checked and is enclosed

---

Name of Applicant

---

Date