

CATHEDRAL INTERNATIONAL

P.O. BOX 1608
277 Madison Avenue
Perth Amboy, New Jersey 08862

2024 - 2025 Educare Ministry

SCHOLARSHIP APPLICATION INSTRUCTIONS

Please check appropriate box: Full Time ___ Part Time ___

High School Student Undergraduate Student Graduate Student

The Educare Ministry at Cathedral International is pleased to announce the availability of scholarships for the year 2024-2025. The scholarships are awarded to those seeking **FIRST TIME ASSOCIATE, BACCALAUREATE or GRADUATE DEGREES** who have a 3.0 GPA or higher, are members of Cathedral International, show a commitment to God, participate in ministry in and outside of Cathedral International, and community service.

A limited number of scholarships will be awarded to selected applicants in the amount of **\$1000.00 for full-time students and \$500 for part-time students**. They will be based on the following criteria:

1. The student must be an **ACTIVE** member of Cathedral International.
2. Be active in a Cathedral International Ministry, and have verification form completed by the Ministry Head for that specific ministry. In cases where he/she is away at college an **additional** essay on the history of their service and participation in ministry at the Cathedral will be **required**.
3. Proof of Community Service on campus or in the community they live.
4. The student must complete a **typed** essay based on the following topic: *"Choose one sermon or bible study you experienced at Cathedral International. How has what you heard in that experience been applied to your life as a student? How will you apply it to your future?"*
5. Student must have at least a **3.0 GPA** and submit an **OFFICIAL** transcript (with a raised seal) directly from the high school or college/university he/she attends. The transcript **DOES NOT** have to accompany the application, but it must be postmarked by the application deadline.
6. Student must complete the attached **IRS W9 Form** to facilitate mailing of the check by the Cathedral Finance Department when you are awarded the Educare Scholarship award. The funds must be used for education purposes.
7. Incomplete applications will **NOT** be accepted. Do **NOT** email your application to Educare Ministry.
8. **EDUCARE APPLICATION ONLINE: The Educare scholarship application is accessible online. Follow instructions on the Cathedral's website to the Educare application portal. The online portal will be closed on June 10, 2024.**

If completing a hardcopy application, students should mail completed application with attachments to the following address:

Cathedral International
Educare Ministry
P.O. Box 1608
Perth Amboy, NJ 08862

ONLY APPLICATIONS SENT VIA US MAIL OR COMPLETED ONLINE WILL BE CONSIDERED. NO HAND DELIVERY.

ALL HARDCOPY APPLICATIONS MUST BE POSTMARKED BY MONDAY, JUNE 10, 2024.

Contact Info:

www.cathedralinternational.org
educare@thecathedral.org 732.826.5293

APPLICATION SUBMISSION CHECKLIST

Please note that your application can be completed online. You may save it and come back for edits as well as download a printable copy for offline completion of your application. The application packet is considered complete if ALL of the following items have been submitted ONLINE or postmarked by **JUNE 10, 2024**.

- Scholarship Application
- Official School Transcript reflecting 3.0 GPA or higher
- Typed Essay:
ESSAY #1: "Choose one sermon or bible study you experienced at Cathedral International. How has what you heard in that experience been applied to your life as a student? How will you apply it to your future?"

(No less than 500 words and no repeat of essays)

- Cathedral Service Evaluation Form
- Community Service Evaluation Form
- **Out of State Students:** Essay, *"My History of Service and Participation in Ministry at Cathedral International"* (No less than 250 words and No repeat of essays)
- **W9 Form:** IRS W9 Form Attached
- **ONLINE COMPLETED APPLICATIONS MUST CONTAIN ALL THE SAME ABOVE ATTACHMENTS**

Please note that, for the 2024 - 2025 award year, Ministry participation or community service, while away at college or home, will be **REQUIRED** of ALL applicants. Acceptable forms of service include, but are not limited to, the following: mentoring, tutoring, assisting in a soup kitchen, volunteering in a nursing home, volunteering at the church while home on break, etc. All service must be documented, and it **CANNOT** be a service for which you are compensated (e.g., Work-Study, part-time job, etc.). If you have questions about fulfilling the service requirement for the 2024 - 2025 award year, or if you have questions as to whether your service is acceptable, please submit them in writing to the Educare Ministry by email: educare@thecathedral.org

**For Educare
Ministry Use ONLY**

Date received:



CATHEDRAL INTERNATIONAL

P.O. BOX 1608

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2024 – 2025 SCHOLARSHIP APPLICATION

DEADLINE FOR POSTMARK: JUNE 10TH, 2024

I. Personal Information

Name _____

Home Address _____

City/State/Zip Code _____

Home Telephone # _____ Cellular Telephone # _____

Date of Birth _____ Male • Female •

Email Address (1) _____ (2) _____

Student Signature & Date _____

II. Parent Information

Parent (Guardian) Name _____

Address _____

Work Telephone # _____ Home Telephone # _____

Parent/Guardian Signature _____

III. Educational Information

Name of Institution & Address (High School Seniors, please list the name of your high school and the college you anticipate attending)

Grade Point Average _____

PLEASE NOTE: THE EDUCARE MINISTRY MUST BE NOTIFIED OF THE STUDENT'S FINAL COLLEGE/UNIVERSITY CHOICE & RECEIVE PROOF OF ENROLLMENT BEFORE FUNDS ARE DISTRIBUTED TO THE STUDENT.

Check below to indicate what your enrollment status will be:

- Full-time (at least 4 courses per semester: **12 credits**)
- Part-time (at least 1 course per semester)

IV. Church Membership & Ministry

Are you currently a member of Cathedral International? _____

If you are away in College, are you participating in Campus Ministry or attending a local church?

Church/Ministry Name: _____ Length of time serving _____

Pastor/Campus Minister or Director: _____

Are your parents members and tithers of Cathedral International? _____

VI. Essay (Choice one of the two essays)

Must be typed, Times New Roman 12pt Font, Double Spaced, and no less than **500** words on the topic:

Essay #1 "Choose one sermon or bible study you experienced at Cathedral International. How has what you heard in that experience been applied to your life as a student? How will you apply it to your future?"

Attach the essay sheets to the application and place your name in the upper right hand corner of all attached pages.

Student Signature _____ Date _____

CATHEDRAL INTERNATIONAL

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Cathedral Service Verification Form

Student Name: _____

Ministry Name: _____

Ministry Head: _____

Ministry/Church location: _____

Please rank the student by circling the following areas and return this form to the student for submission with the scholarship application.

	Excellent	Good	Average	Below Average	Poor
Attitude	10	8	6	4	0
Integrity	10	8	6	4	0
Interpersonal Skills	10	8	6	4	0
Level of Involvement	10	8	6	4	0
Willingness to Serve	10	8	6	4	0

Comments: _____

Ministry Head Signature: _____ Date: _____

NOTE: For those away at college, please have the following Community Service Form completed by your Campus Ministry Director, a local Pastor or a representative where you are serving and attending church.

CATHEDRAL INTERNATIONAL

P.O. BOX 1608
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Community Service Evaluation Form

Student Volunteer Name: _____

Organization Name: _____

Program Director/Manager: _____

Address: _____

Telephone: _____

Non-Profit _____ For-Profit _____

Please describe the nature of the community service and the role that you provided: _____

Approximate # of hours served: _____

Program Director: Please rank the volunteer by circling the following areas and return this form to the student for submission with the scholarship application.

	Excellent	Good	Average	Below Average	Poor
Attitude	10	8	6	4	0
Integrity	10	8	6	4	0
Interpersonal Skills	10	8	6	4	0
Level of Involvement	10	8	6	4	0
Willingness to Serve	10	8	6	4	0

Program Director's Comments: _____

Program Director's Signature: _____ Date: _____

PLEASE COMPLETE THE APPLICATION ONLINE OR
RETURN THIS PAPER APPLICATION VIA US MAIL ONLY
TO THE FOLLOWING ADDRESS:

Cathedral International
P.O. Box 1608
Perth Amboy, NJ 08862
ATTN: Educare Ministry

**ALL hardcopy applications must be postmarked by the
deadline:
MONDAY, JUNE 10, 2024**

REMEMBER!

The transcript **MUST** be an official school document and must be forwarded to the Educare Ministry either directly from the school OR in a sealed envelope with the application postmarked by **JUNE 10, 2024**. If your school will be mailing transcripts to us directly, please inform your school that your transcripts **MUST** be received no later than **JUNE 10TH** in order to be considered for the scholarship.

If completing the application online, be sure to submit it by the deadline.

Also, the **IRS W9 Form** must be completed and signed. You **ONLY** need to complete **Part 1** of the form. Please ensure that your address is accurate and complete because that is where the scholarship check will be mailed.

NOTE: All funds must be used for educational purposes.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	2	Business name/disregarded entity name, if different from above.		
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>		
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	
	6	City, state, and ZIP code		
	7	List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
				-					
or									
Employer identification number									

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they