

**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

## Dr. Katherine Williams Phillips Memorial Scholarship

(For Trinity United Church of Christ Members Only)

*Graduating high school student(s) to support tuition or university fees for room, board, fees, books, supplies or other needed expense for college enrollment.*

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 Additional Attachments if Necessary)*

Ministry	From	To	Chairperson
_____	_____	_____	_____
Ministry	From	To	Chairperson
_____	_____	_____	_____

**Offices Held in Ministries at Trinity:**

Title	From	To	Chairperson
_____	_____	_____	_____
Title	From	To	Chairperson
_____	_____	_____	_____

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Applicants Must Submit:

- Official high school transcript with a minimum 3.0 unweighted GPA.
- College acceptance letter and proof of registration
- Letters of Recommendation from a counselor or teacher.
- Submit an essay on “What did Dr. Katherine W. Phillips teach about diversity and how will that knowledge and this scholarship help you on your journey into college and career?”
- Ministry/Community Service Verification Form
- **Graduate Recognition Form**

**Checklist**

- Official high school transcript with a minimum 3.0 unweighted GPA
- College acceptance letter and proof of registration
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**DEADLINE FOR SUBMISSION WEDNESDAY MAY 9, 2024, emailed to [applications@trinitychicago.org](mailto: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:** \_\_\_\_\_

**Giving #:** \_\_\_\_\_ **Any Special Needs?** \_\_\_\_\_