



## Rev. Dr. William M. James Family Memorial SCHOLARSHIP PROGRAM

475 Riverside Drive, Suite 1922 · New York, NY 10115 Tel: (212) 870-3084 · Fax: (212) 870-3091

Dear Friend in Christ,

Enclosed, please find a copy of the application for the Rev. Dr. William M. James Family Memorial Scholarship Fund, established by his estate and generosity of his friends.

Dr. James wanted this scholarship to encourage young people who aspire to be agents for the transformation in their communities, society or the world.

Limited funds are available for those persons who have or will be attending an accredited institution of higher education, have leadership potential, and some level of financial need.

They must be recommended by their pastor, a lay person who is a leader in their local church, and a teacher or professor.

All candidates must meet the following criteria:

- Membership in a United Methodist church in the New York Annual Conference.
- Enrollment in a program at an accredited college or university approved by the Scholarship Committee.
- Full time student for the academic year 2022-2023.

The Scholarship Committee will NOT review applications from persons who:

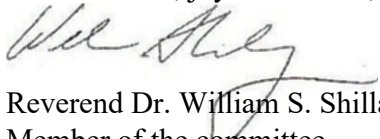
- Are not members of churches in the New York Annual Conference.
- Are pursuing an additional advanced degree (*i.e., master's degree or doctoral degree*).
- Are not pursuing programs that will lead to a degree or certificate.
- Do not submit the application by the deadline.

**The scholarship application deadline for the 2022-2023 academic year is May 6<sup>th</sup>, 2022, by 12 Noon, if hand delivered or emailed. The application must be postmarked by May 6<sup>th</sup>, 2022, if using the U.S. Postal Service, FedEx or UPS. Complete applications can be emailed to [scholarshipinfo@umcitysociety.org](mailto:scholarshipinfo@umcitysociety.org)**

Late and/or incomplete applications will not be accepted. All reference letters must be mailed separately. Emails are acceptable for these references. (Your application will not be denied if we do not receive a reference letter by the deadline from your pastor, church lay leader or teacher or professor as long as we have their contact information.)

Feel free to contact me by email at [bshillady@umcitysociety.org](mailto:bshillady@umcitysociety.org) or by phone at (212) 870-3084, if you have any questions or need any further information concerning the Scholarship Fund.

In God's love, joy and humor,



Reverend Dr. William S. Shillady  
Member of the committee



### Rev. Dr. William M. James

A pastor, professor, author and church and community leader—exhorted in his teaching and exemplified in his life and witness the importance of academic education, faith in God and Christ-like commitment to one's church and community.

**UNITED METHODIST CITY SOCIETY**  
**GUIDELINES FOR THE REV. DR. WILLIAM M. JAMES SCHOLARSHIP**  
**FOR THE ACADEMIC YEAR 2022-2023**

Requirements and Procedures

- I. The applicant must be a member of a United Methodist Church in the New York Annual Conference.
- II. The scholarship shall be granted primarily to a person studying in a degree program at a college, university or seminary approved by the Scholarship Committee.
- III. Applicant must present to the Scholarship Committee a current transcript of scholastic standing in the school where the applicant has been studying, a diploma, and/or a copy of the letter of acceptance in the college or seminary where the applicant will be studying. A transcript from a previous school or previous year in a school is required; a résumé, a listing of awards and a listing of church activities is also required.
- IV. Letters of recommendation are required from your Pastor; Local Church leader and Teacher/Professor and these letters must be sent independently from your application. Please request these letters and inform your recommenders to send their letter directly to [scholarshipinfo@umcitysociety.org](mailto:scholarshipinfo@umcitysociety.org).
- V. Applications for the Rev. Dr. William M. James Scholarship are received through the office of the United Methodist City Society, 475 Riverside Drive, Room 1922, New York, NY 10115. Attn: Rev. Dr. William James Family Scholarship. Email of the application will be accepted at [scholarshipinfo@umcitysociety.org](mailto:scholarshipinfo@umcitysociety.org)
- VI. The scholarship granted shall be paid to the educational institution involved. For the check to be issued to the business office of the school, it shall be the responsibility of the recipient to send the following to the Scholarship Committee at the United Methodist City Society office:
  - A. The applicant's proof that he/she is fully registered in the college or seminary. (Official registration form)
  - B. The applicant's course list.
  - C. The bill for tuition. Grants will vary depending upon full time and part time programs.
  - D. If a student leaves the school after being granted a scholarship, the school shall return any remaining balance to the Rev. Dr. William M. James Scholarship Fund.
  - E. Financial need will be taken into consideration. Please complete the attached financial statement and attach the required first two pages of you or your guardians 2021 1040 tax forms Additional forms and information may be requested, by the committee.
- VII. Scholarship monies will be used in the following priority areas:
  - a. Undergraduate degree program
  - b. Graduate first-degree program
- VIII. The funds will NOT be available for those who already hold a master's degree or doctoral degree and those who are doing additional graduate work or continuing education.
- IX. Scholarships are awarded for one year. Scholarship grantees may reapply for their next year of school.

## Application Submission

All candidates must complete all required parts of the application for application for submission to the scholarship committee.

- This application requires additional documents, the following file types **WILL** be accepted including pdf, word, excel, ppt and all google documents.
- Your documents will **NOT** be accepted if they are: msg, .tex, zip files, .odt, html, pages, .exe, .jar, .cmd, jpeg /png.
- Please add the email [scholarshipinfo@umcitysociety.org](mailto:scholarshipinfo@umcitysociety.org) to your safe sender email list. All correspondence will be done via email, and it is important that you receive all emails.
- Please ensure that the additional pages with your essay response include your name on each page as a header and are numbered.

The deadline for scholarship application is May 6<sup>th</sup>, 2022, by 12 Noon, if hand delivered or sent by email. The application must be at the United Methodist City Society offices via USPS, UPS, or FED EX (Postmarked – May 6<sup>th</sup>, 2022). Complete applications can be emailed to [scholarshipinfo@umcitysociety.org](mailto:scholarshipinfo@umcitysociety.org).

All questions should be addressed to:  
The Rev. Dr. William M. James Scholarship Committee  
c/o Rev. Dr. William S. Shillady  
Phone: 212-870-3094  
Fax: 212-870-3091  
Email: [bshillady@umcitysociety.org](mailto:bshillady@umcitysociety.org)

### The Rev. Dr. William M. James Scholarship Committee

Rev. Dr. John E. Carrington

Rev. William R. Freeman

Rev. Dr. Richard Hayes

Mrs. Jade Sharp-James

Mr. Ryan L. James

Mr. Archie Maybanks

Rev. Dr. William S. Shillady

Rev. Dr. Anthony J. Shipley, 2014-2019, founding member

Rev. Dr. Denise Smartt Sears

# REV. DR. WILLIAM M. JAMES FAMILY SCHOLARSHIP APPLICATION

The Rev. Dr. William M. James Family Fund Scholarship was established in 2013 following Rev. James' death to encourage young people who aspire to become agents for the transformation of the world. The applicant must be accepted and enrolled at an accredited institution of higher education, have leadership potential, financial need and be recommended by their local pastor of the United Methodist Church.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(Please include your full mailing address)

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

HOW LONG HAVE YOU BEEN A MEMBER OF THE UNITED METHODIST CHURCH? \_\_\_\_\_

CHURCH NAME: \_\_\_\_\_

PASTOR: \_\_\_\_\_

HOW LONG HAVE YOU BEEN A MEMBER OF THIS CHURCH? \_\_\_\_\_

IF LESS THAN 2 YEARS, PLEASE LIST YOUR OTHER CHURCHES AND THE NUMBER OF YEARS YOU WERE A MEMBER: \_\_\_\_\_

DISTRICT: \_\_\_\_\_

DISTRICT SUPERINTENDENT: \_\_\_\_\_

CURRENT SCHOOL: \_\_\_\_\_

CURRENT GRADE POINT AVERAGE (GPA): \_\_\_\_\_

WHAT IS YOUR CURRENT LEVEL OF STUDY AT THIS SCHOOL? \_\_\_\_\_

WHAT INSTITUTION WILL YOU ATTEND IN THE FALL OF 2022? \_\_\_\_\_

MAJOR / FIELD OF STUDY: \_\_\_\_\_

FULL TIME  PART TIME  HOW MANY COURSES WILL YOU TAKE? \_\_\_\_\_

CREDITS TO BE EARNED: \_\_\_\_\_

## AWARD PROCESS

THE APPLICANT MUST BE BETWEEN THE AGES OF 16-25 AND HAVE MAINTAINED AT LEAST A "C" AVERAGE IN HIGH SCHOOL AND A 2.75 GPA OR BETTER WHILE IN COLLEGE OR SEMINARY TO RECEIVE A SCHOLARSHIP.

FUNDS WILL NOT BE AVAILABLE TO THE STUDENT UNTIL CLASSES HAVE STARTED AND THE SCHOLARSHIP COMMITTEE HAS RECEIVED THE VERIFICATION OF ENROLLMENT FROM THE SCHOOL'S REGISTRAR. THE CHECK WILL BE MADE PAYABLE TO THE SCHOOL.

THE AMOUNT OF THE AWARD IS DETERMINED BY FUNDS AVAILABLE AND THE DECISION OF THE SCHOLARSHIP COMMITTEE BASED ON ITS REVIEW OF THE APPLICATION AND ALL THE REQUIRED DOCUMENTS.

### **LETTERS OF RECOMMENDATION:**

*You must request your pastor, Local Church Leader and Teacher or Professor to send a letter, or email of reference separately and independently. Your application will not be denied if we have not received the reference letter by the deadline as long as we have the completed information below.*

*These letters of recommendation are to be sent directly to The United Methodist City Society at [scholarshipinfo@umcitysociety.org](mailto:scholarshipinfo@umcitysociety.org).*

*Please encourage your recommenders to meet the May 6<sup>th</sup>, 2022, deadline.*

Please list the names of your recommenders', their e-mail address, and their mailing address.

**Email addresses are required by the committee.**

**PASTOR'S NAME:** \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

**LOCAL CHURCH LEADER:** \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

**TEACHER OR PROFESSOR:** \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

*(PLEASE NOTE THAT **YOUR APPLICATION** MUST BE SUBMITTED BY THE DEADLINE.)*

**PLEASE ATTACH THE FOLLOWING:**

- A) **Certified Official Copy** of your Academic Transcript from your current school.
- B) **Essay** – You must write an essay of your aspirations to become a leader for the transformation of your community, society, or the world. (Write this essay and attach to your application) What experiences have transformed you? How important has your church been in nurturing your leadership? This essay should be a minimum of 500 words double spaced.
- C) Required **summary pages (first two) of the federal 1040 form** for the 2021 tax year as verification of income.
- D) **Résumé** – Include your church activities, school activities, community involvement and awards received.

**FINANCIAL STATEMENT**

**I. HAVE YOU EVER RECEIVED A SCHOLARSHIP FROM THIS FUND? YES  NO**

**II. DO YOU CURRENTLY HAVE ANY OUTSTANDING LOANS/DEBTS? YES  NO**

(IF THE ANSWER IS YES, PLEASE LIST LOANS/DEBTS ON A SEPARATE SHEET OF PAPER AND SUBMIT WITH THIS APPLICATION)

**III. WHAT ARE YOUR ESTIMATED EXPENSES FOR THE CURRENT SCHOOL YEAR?**

Tuition and fees: ..... \$ \_\_\_\_\_  
How many credits does this represent? \_\_\_\_\_

Books: ..... \$ \_\_\_\_\_  
Housing: ..... \$ \_\_\_\_\_  
Food: ..... \$ \_\_\_\_\_  
Other Living Expenses: ..... \$ \_\_\_\_\_  
Other Expenses: ..... \$ \_\_\_\_\_  
Total: ..... \_\_\_\_\_

**IV. WHAT ARE YOUR SOURCES OF INCOME FOR THE CURRENT SCHOOL YEAR?**

Salary: ..... \$ \_\_\_\_\_  
Scholarships / Grants: ..... \$ \_\_\_\_\_  
Savings: ..... \$ \_\_\_\_\_  
Loans: ..... \$ \_\_\_\_\_  
Gifts: ..... \$ \_\_\_\_\_  
Total: ..... \_\_\_\_\_

**V. PLEASE ANSWER THE FOLLOWING QUESTIONS ABOUT YOUR EMPLOYMENT (IF EMPLOYED):**

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

Employer: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Other Income: YES  NO  If Yes: \_\_\_\_\_

**VI. PLEASE ANSWER THE FOLLOWING QUESTIONS ABOUT YOUR HOUSEHOLD COMPOSITION:**

1. ARE YOU MARRIED?  YES  NO \_\_\_\_\_

2. IS YOUR SPOUSE EMPLOYED?  YES  NO IF YES, WHAT IS THEIR SALARY? \_\_\_\_\_

3. HOW MANY CHILDREN RESIDE IN YOUR HOUSEHOLD? \_\_\_\_\_

**VII. PLEASE USE THE SPACE BELOW TO PROVIDE ANY ADDITIONAL INFORMATION THAT YOU FEEL WILL HELP THE COMMITTEE IN UNDERSTANDING YOUR CURRENT FINANCIAL SITUATION. (YOU MAY USE A SEPARATE SHEET(S) OF PAPER.**

**VIII. IF YOU ARE BELOW AGE 21, PLEASE PROVIDE THE INFORMATION REQUESTED BELOW FOR YOUR PARENTS OR GUARDIANS (PLEASE PROVIDE A COPY OF THE FIRST TWO PAGES OF YOUR GUARDIANS FEDERAL 1040 FORM FROM 2021 AS VERIFICATION OF INCOME)**

**MOTHER OR GUARDIAN 1**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
EMPLOYER: \_\_\_\_\_  
TYPE OF BUSINESS: \_\_\_\_\_  
POSITION: \_\_\_\_\_ SALARY: \$ \_\_\_\_\_  
TOTAL NO. OF DEPENDENTS: \_\_\_\_\_ TOTAL NO. OF CHILDREN IN COLLEGE: \_\_\_\_\_

**FATHER OR GUARDIAN 2**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
EMPLOYER: \_\_\_\_\_  
TYPE OF BUSINESS: \_\_\_\_\_  
POSITION: \_\_\_\_\_ SALARY: \$ \_\_\_\_\_  
TOTAL NO. OF DEPENDENTS: \_\_\_\_\_ TOTAL NO. OF CHILDREN IN COLLEGE: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

**THIS APPLICATION MUST BE IN THE OFFICES OF THE UNITED METHODIST CITY SOCIETY  
BY NOON ON FRIDAY, May 6<sup>th</sup>, 2022.**

**If using UPS, USPS or FEDEX, it must be postmarked by May 6<sup>th</sup>, 2022, and mailed to:**

THE UNITED METHODIST CITY SOCIETY  
ATTN: REV. WILLIAM JAMES FAMILY SCHOLARSHIP  
475 RIVERSIDE DRIVE, SUITE 1922  
NEW YORK, NY 10115

**You may fax or email the COMPLETED APPLICATION to:**

**Fax: 212-870-3091**

**Email: [scholarshipinfo@umcitysociety.org](mailto:scholarshipinfo@umcitysociety.org)**

*Incomplete applications will **NOT** be considered by the Scholarship Review Committee.*