AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

Scholarship Eligibility Criteria

Participation in the selection process begins with an inquiry by the potential candidate, completion of the application forms (recommendations, application) and an initial interview with the director. Upon recommendation by the director, the candidate is then interviewed by the Scholarship Selection Committee. The Scholarship Selection Committee is solely responsible for the review of candidates and the selection of Scholars. The committee is comprised of representatives from various departments at Catholic Theological Union, the Archdiocese of Chicago and representatives from the Black Catholic community.

The selection criteria includes a review of eligibility on the basis of (1) academic background, (2) personal qualifications, (3) ministerial experience, (4) expectations of the program and ministerial goals. If selected the Scholar must continue to meet the criteria and program expectations for continuation of their scholarship. Scholarships are reviewed annually by the Selection Committee. The scholar candidate must have three letters of recommendation (pastoral, academic, ministerial) and meet the following criteria:

ACADEMIC BACKGROUND
The Candidate:

- has a bachelor’s degree or its equivalent from an approved college or university.
  [CTU’s basic academic standard]

- has demonstrated a consistent interest in reading and continuing education.

- has an aptitude and interest in graduate studies in ministry and theology as applicable to ministry in the Black Catholic community, and

- is willing to make the commitment to work towards earning a master’s degree as either a part-time or full-time student.

PERSONAL QUALIFICATIONS
The Candidate:

- must be a practicing Black Catholic of the Roman Rite. Regular attendance/membership in Roman Catholic parish in the Archdiocese of Chicago.

- exhibits a sense of call to professional ministerial leadership within the Roman Catholic Church.

- demonstrates a sense of Catholic identity and a capacity to engage in faith sharing with parish staff and parishioners.
demonstrates a sense of identity as a Black person and a commitment to the Black community.

possesses an understanding of and commitment to the mission of the Church including a sense of justice and cultural sensitivity, and

has a realistic sense of self and an ability to relate and communicate well with others.

MINISTERIAL EXPERIENCE

The Candidate:

is actively involved in church-related ministry with movement/potential towards ministerial leadership.

has volunteered or worked consistently in a parish, deanery or church-related ministry within the Black or multicultural community.

demonstrates the ability to work collaboratively and constructively with others.

EXPECTATIONS OF PROGRAM AND MINISTERIAL GOAL

The Candidate:

is expected to engage and fully participate in the Formation and Theological Reflection process of the Augustus Tolton Pastoral Ministry Program as outlined in Scholar handbook. This means the Scholar must complete at the minimum the four-year formation cycle.

is expected to participate in the fundraising/public relations aspects of the program as outlined in the Scholar handbook.

is expected to work in conjunction with the director of the Tolton Program in setting and implementing spiritual, academic, personal and ministerial goals.

is expected to finish every course and maintain a 3.2 GPA.

(by his/her actions) is mindful that he/she is preparing for public ministerial leadership for the Catholic Church within the Archdiocese of Chicago.

is committed to work in the Archdiocese of Chicago in or on behalf of the Black Catholic Community for at least three years after graduation.

understands that the Tolton Scholarship is renewable and he/she is evaluated each year regarding his/her continued participation in the scholarship/formation program.

PROGRAM GOALS

Prepare the student for professional lay ministerial leadership in the Archdiocese of Chicago.

Prepare the student for professional lay ministerial leadership in the African-American Catholic community.
- Provide the student with tools to minister in the Catholic Church.

- Assist the student in their development (ministerially, spiritually, academically, personally) while attending Catholic Theological Union.

- Assist the student in their adjustment as a theological graduate student at Catholic Theological Union.
TOLTON SCHOLARSHIP CANDIDATE CHECKLIST

Below is the process for applying for a Tolton Scholarship:

- Completion of Tolton Inquiry Form (usually completed over phone)
- Complete CTU application
- $50.00 application fee (to be included with completed CTU application – you must be accepted to CTU’s degree program before you can receive a scholarship)
- Request transcripts to be submitted to CTU Admissions Office
- Complete Tolton Scholarship Application
- Complete Tolton Financial Form
- Complete three Recommendation Letters
  - Pastoral
  - Academic
  - Ministerial
- Initial Interview with Director
- Meet screening team in 2nd/3rd week of May.
- Decision made regarding Tolton Scholarship within two weeks of screening meeting.

Return/mail all these (applications, transcripts, recommendations) materials by April 30, 2014 to:

Dr. C. Vanessa White
Director, Augustus Tolton Program
Catholic Theological Union
5416 S. Cornell
Chicago, IL 60615
Phone: 773.371.5440
Fax: 773.324.4360
Email: tolton@ctu.edu

12/18/2013
AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

Application for Scholarship

Name: ___________________________ Date of Birth: ______________________

Address: ___________________________ Phone: ______________________

______________________________ Work Phone: ______________________

Email: ___________________________ Cell Phone: ______________________

Parish: ___________________________ Pastor: ______________________

Present Employment: _______________________________________________

Present Ministerial Involvement: _______________________________________

Status: _____ Single _____ Married _____ Divorced _____ Vowed Religious

Children: _____ No _____ Yes _________

# __________ Ages __________

PREVIOUS EDUCATIONAL BACKGROUND
List chronologically colleges, universities and graduate schools in which you have been enrolled, as well as on-going educational opportunities pursued.

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<thead>
<tr>
<th>School and Location</th>
<th>Dates</th>
<th>Course Degree</th>
<th>Date Rec’d</th>
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**EMPLOYMENT HISTORY**

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<tr>
<th>Date</th>
<th>Name Of Employer</th>
<th>Type Of Work</th>
<th>Net Income</th>
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1. Do you anticipate a change in your employment, which would affect your participation in this degree program?

2. What arrangements do you anticipate making for your current working and family responsibilities while you are involved in this program?

**AUTOBIOGRAPHICAL**

On a separate sheet of paper, please answer the following questions within 1000 and 2500 words:

1. What inspired your interest in church-related ministry?
2. What are your ministerial goals for the future?
3. State what ministry means to you?
4. Why are you interested in this scholarship/pastoral ministry program?
5. Who has mentored you over the years? Who have been your role models? Your support?
6. How do you see this program preparing you for ministerial leadership for the Roman Catholic Church of Chicago?
7. This scholarship is for Black Catholics preparing for ministerial leadership in the Archdiocese of Chicago; how do you see this scholarship and your theological study benefiting the Black Catholic community?
8. Give an evaluation of your ability to pursue this degree?
9. Describe the extent of support you have from your family and parish for participation in this program?
10. Is there anything else the scholarship committee should know about you and your plans for ministry in considering your application?

Complete the Tolton Scholars Finance Sheet; submit the three letters of recommendation and this Scholarship Application Form by April 30, 2014 to:

Dr. C. Vanessa White  
Director, Augustus Tolton Program  
Catholic Theological Union  
5416 S. Cornell  
Chicago, IL 60615  
Phone: 773.371.5440 Fax: 773.324.4360  
Email: tolton@ctu.edu
THE AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

Financial Information Form

Name: ___________________________  Social Security No.: ______________________

Address: ________________________________

Email: ____________________________  Phone: ________________________________

EMPLOYMENT HISTORY

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<th>Name of Employer</th>
<th>Type of Work</th>
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FINANCIAL INFORMATION

1. Will you be an applicant for or receiving scholarships or loans from sources other than those being applied for with this form? Yes ☐ No ☐ If yes, list sources and amount requested below. Indicate status of request (e.g., will apply, request granted, denied, pending, etc.).

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<thead>
<tr>
<th>Source</th>
<th>Amount</th>
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2. Will you own or operate a vehicle during the upcoming academic year? Yes ☐ No ☐ If yes, give Make/Year ______________________________

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<th>Model</th>
<th>Remaining Indebtedness</th>
<th>Estimated operating cost per month (including monthly payment)</th>
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3. Have you had any prior government loans for education? Yes □ No □ If yes, are they __paid__ __deferred__?

Total amount of current indebtedness through student loans: __________.

**STUDENT’S AND SPOUSE’S RESOURCES** 20__-20__ (indicate projections with "**")

1. Students summer income from all sources after federal, state, FICA and local taxes. __________

2. Student’s academic year income from all sources after federal, state, FICA and local taxes. __________

3. Spouse’s total income after taxes. __________

4. Student’s total social security educational benefits __________

5. Student’s total Veterans-GI Bill educational benefits. __________

6. Financial assistance from student’s parents, family, religious community. __________

7. Income from non-CTU scholarships, fellowships, grants. __________

8. Student loans from all sources. __________

9. Income from CTU Financial Aid __________

10. Other income (savings accounts, bonds, etc.). __________

**TOTAL:** __________

**STUDENT’S ESTIMATED EXPENSES** 20__- 20__ Academic Year

1. **Tuition and Fees**
   - ________ Fall Semester __________
     - __________ Fall Tuition Cost
   - ________ Spring Semester __________
     - __________ Spring Tuition Cost
   - **Other Academic Fees**

2. Books, Supplies, Xeroxing __________

3. Rent and Utilities __________

4. Food and Household Supplies __________
5. Clothing, Laundry, Cleaning

6. Travel

7. Mail

8. Entertainment

9. Medical, Dental Insurance

10. Debt Repayment

11. Other (itemize)

Total

RETURN BY APRIL 30, 2014
THE AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

Academic Recommendation Form

Applicant’s Name: ________________________________

I agree that the recommendation I am requesting shall be held in confidence by the officials of both the Augustus Tolton Pastoral Ministry Program and Catholic Theological Union, and I hereby waive any rights I may have to examine it.

Yes [ ] No [ ] Applicant’s Signature: ________________________________

The person named above has applied for admission to Catholic Theological Union and the Augustus Tolton Pastoral Ministry Program. S/he has given your name as one who will give an evaluation of her/his potential for theological study and ministry. It will be helpful if you give us candid, forthright answers to the following questions. We believe a good reference will point to the student’s weaknesses/areas of development as well as strengths.

1. How long and in what capacity do you know the applicant?

2. Write about the applicant’s intellectual qualities and academic work.

3. How would you assess the applicant’s character, aims and values? Are there special strengths or problems of which we should be aware?
4. How would you characterize the applicant’s religious concern, understanding and growth?

5. Additional comments:

I, [ ] recommend, [ ] do not recommend, this student for admission.

________________________________________  __________________________
Signature                                  Date

________________________________________
Address

________________________________________
Institution                            Position

________________________________________
Telephone                            Email

Please return by April 30, 2014 to:

Dr. C. Vanessa White
Director, Augustus Tolton Program
Catholic Theological Union
5401 S. Cornell
Chicago, IL 60615-5698
Phone: 773.371.5440
Fax: 773.324.4360
tolton@ctu.edu
THE AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

Ministerial Recommendation Form

Applicant’s Name:____________________________________

I agree that the recommendation I am requesting shall be held in confidence by the officials of both the Augustus Tolton Pastoral Ministry Program and Catholic Theological Union, and I hereby waive any rights I may have to examine it.

Yes ☐ No ☐ Applicant’s Signature:____________________________________

The person named above has applied for admission to Catholic Theological Union and the Augustus Tolton Pastoral Ministry Program. S/he has given your name as one who will give an evaluation of her/his potential for theological study and ministry. It will be helpful if you give us candid, forthright answers to the following questions. We believe a good reference will point to the student’s weaknesses/areas of development as well as strengths.

1. Briefly describe how you know the applicant.

2. Briefly describe a situation in which she/he has “ministered” to you.

3. Briefly comment on when you have seen the applicant use the following skills:
   a. Relates to people effectively, b. Works with a team, c. Listens attentively,
   d. Is flexible and adaptable, and e. Is able to accept criticism.
4. What are the applicant’s strengths and areas in which she/he needs to develop?

5. Why do you think this applicant would be a good minister in the African American community?

6. Additional comments:

I, ☐ recommend, ☐ do not recommend, this student for admission.

________________________________________________________________________
Signature                      Date
________________________________________________________________________
Address
________________________________________________________________________
Parish/Agency                  Ministry
________________________________________________________________________
Phone                           Email:
________________________________________________________________________
Please return by April 30, 2014 to: Dr. C. Vanessa White
Director, Augustus Tolton Program
Catholic Theological Union
5401 S. Cornell
Chicago, IL 60615-5698
Phone: 773.371.5440
Fax: 773.324.4360
THE AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

Pastoral Recommendation Form

Applicant’s Name: ________________________________

I agree that the recommendation I am requesting shall be held in confidence by the officials of both the Augustus Tolton Pastoral Ministry Program and Catholic Theological Union, and I hereby waive any rights I may have to examine it.

Yes ☐ No ☐ Applicant’s Signature: ________________________________

The person named above has applied for admission to Catholic Theological Union and the Augustus Tolton Pastoral Ministry Program. S/he has given your name as one who will give an evaluation of her/his potential for theological study and ministry. It will be helpful if you give us candid, forthright answers to the following questions. We believe a good reference will point to the student’s weaknesses/areas of development as well as strengths.

Please give concrete examples of how the applicant meets the criteria for the Augustus Tolton Pastoral Ministry Program as outlined on the criteria sheet.

PERSONAL CHARACTERISTICS
How would you assess the applicant’s attitudes, behavior and spirituality as it relates to a call to participation in ministry?

MINISTERIAL EXPERIENCE
In what Church or community service has s/he been actively involved?

How does s/he work with a team?
MINISTERIAL GOAL
Describe how you know this applicant and how long have you known her/him.

What other strengths and skills for ministry does this applicant exhibit?

Please describe areas where this applicant needs to grow.

Would you be willing to work with this applicant as a member of your pastoral team?

Additional comments:
I  □ recommend  □ do not recommend, this applicant for admission.

________________________________________________________________________

Signature                Date
________________________________________________________________________

Parish                   Ministry
________________________________________________________________________

Address                  
________________________________________________________________________

Phone                    Email
________________________________________________________________________

Please return by April 30, 2014 to:  Dr. C. Vanessa White
                                      Director, Augustus Tolton Program
                                      5401 S. Cornell Avenue
                                      Chicago, IL 60615-5698
                                      Phone: 773.371.5440
                                      Email: tolton@ctu.edu