The John C. Kulis Charitable Foundation, commonly known as the Kulis Foundation, is a 501(c)(3) non-profit private foundation dedicated to supporting religious, humanitarian, and educational initiatives benefitting Orthodox Christian and Hellenic communities worldwide. Since 2013, the Kulis Foundation has provided grants and scholarships to individuals and organizations that are committed to supporting these initiatives. The Kulis Foundation administers seven (7) scholarship programs: Undergraduate Scholarship, Students in the Sciences Scholarship, Robert Rizzie Memorial Undergraduate Accounting Scholarship, Graduate Scholarship, St. Philip the Deacon Seminarian Scholarship, Karasia Kulis Advanced Degrees in Health Science Scholarship, and the Dr. John C. Kulis Medical School Scholarship. Applicants must submit a complete application to the Scholarship Committee by the due date in order to be considered for an award. Students may only apply for one (1) scholarship program each year. The Kulis Foundation reserves the right to move applicants between scholarship programs based on the applicant’s eligibility, financial need and available scholarship funds. The Kulis Foundation also reserves the right to award scholarships in amounts that exceed the scholarship award amount listed next to each scholarship program identified below based on the financial need of the applicant, academic performance, community service and the quality of the application submitted. Please make sure that you read these instructions very carefully.

This application must be filled out in its entirety. Please print clearly. All required documentation must be included with your submission and sent together in one envelope or email submission (with the exception of letters of recommendation and official transcripts, see list below and Checklist for details). Make sure to include the Checklist as the top page of your completed application. The Scholarship Committee will not consider incomplete applications. The deadline for submitting a completed application is April 1, 2018. It is the responsibility of each applicant to ensure that their application is complete.

General Eligibility Requirements:

The following General Eligibility Requirements apply to all Scholarship programs identified in the Specific Eligibility Requirements section below:

- Applicant’s demonstration of financial need. Financial need may be demonstrated in many ways, including but not limited to one or more of the following:
  1) Amount of household income;
  2) Total educational costs to obtain a degree;
  3) Total student loan debt to date;
  4) Single parent household as a result of death or divorce;
  5) Family member illness;
  6) Disability of one or more parents;
  7) Retirement of one or more parents;
  8) One or more siblings in college;
  9) The showing of significant medical expenses incurred for the care and treatment of yourself or an immediate family member; and
  10) Other extenuating or unforeseen circumstances causing financial strain or the accumulation of necessary debt.
• Applicants must be of Greek Heritage and/or Eastern Orthodox faith, within one of the following jurisdictions: Greek Orthodox Archdiocese of America, American Carpatho-Russian Orthodox Diocese of the USA, and the Ukrainian Orthodox Church of the United States.

• Unless the Applicant is applying for a scholarship based on Greek Heritage, Applicants must also be active members of an Orthodox parish and provide evidence of being actively involved with parish activities.

• Applicants applying based on Greek Heritage must submit one of the following: (1) Birth Certificate, (2) Baptism Record, or (3) Official Government Documents.

• Applicants must either be United States citizens, permanent residents of the United States, or have obtained an F-1 visa permitting study in the United States. If Applicant is a permanent resident or holds an F-1 visa, proof of such status is required.

• Applicants must be in good academic standing with a minimum grade point average of 3.0, B, or 80.

• With the exception of students applying for the St. Philip the Deacon Seminary Scholarship, applicants must seek admittance or be attending a U.S eligible educational institution which is defined as any college, university, vocational school, or other post-secondary educational institution eligible to participate in a student aid program run by the U.S. Department of Education.

• Students receiving a full scholarship from any other source or one or more scholarships exceeding fifty percent (50%) of their total educational costs are not eligible for this scholarship program. For purposes of the Kulis Foundation’s Scholarship programs, educational costs include: tuition, books and supplies, administrative and mandatory fees, school mandated insurance plan costs, room and board or housing costs, transportation and travel costs, food expenses, an annual living allowance (predetermined by the Kulis Foundation) and student loan payments.

Specific Eligibility Requirements:

• Undergraduate Scholarship (Minimum of ten (10) $5,000 scholarships to be awarded). Undergraduate Applicants must either be (i) a high school senior starting an undergraduate degree program in the Fall of 2018 or (ii) an already matriculated full-time student in an undergraduate degree program at an accredited college or university located in the United States.

• Students in the Sciences Scholarship (Maximum of ten (10) $5,000 scholarships may be awarded). Undergraduate Applicants must either be (i) a high school senior and starting an undergraduate degree program in the Fall of 2018 or (ii) an already matriculated full-time student in an undergraduate science-related degree program at an accredited college or university located in the United States. Graduate Applicants must be college graduates and either be (i) commencing their graduate studies in the Fall of 2018 or (ii) continuing with their graduate program studies on a full-time basis, at an accredited university located in the United States in a science-related field of study leading to a graduate degree.
• **Graduate Scholarship (Maximum of ten (10) $5,000 scholarships to be awarded).** Graduate Applicants must be college graduates and either be (i) commencing their graduate studies in the fall of 2018 or (ii) continuing with their graduate program studies on a full-time basis, at an accredited university located in the United States in a non-theological field of study leading to a graduate degree.

• **St. Philip the Deacon Seminary Scholarship (Multiple $5,000 scholarships may be awarded).** Applicants must be of the Eastern Orthodox faith, within one of the following jurisdictions: Greek Orthodox Archdiocese of America, American Carpatho-Russian Orthodox Diocese of the USA, and the Ukrainian Orthodox Church of the United States. Applicants must either be commencing their studies or continuing with their seminarian studies on a full-time basis leading to ordination, at one of the following seminaries: Holy Cross Greek Orthodox School of Theology, Brookline, MA; Christ the Saviour Carpatho-Russian Seminary, Johnstown, PA or St. Sophia Ukrainian Orthodox Theological Seminary, South Bound Brook, NJ. Candidates in undergraduate or graduate religious studies or theology programs are ineligible for this scholarship.

• **Robert Rizzie Memorial Undergraduate Accounting Scholarship (Maximum of two (2) $10,000 scholarships may be awarded).** Applicants must be either be a junior or senior majoring in Accounting at Loyola University Chicago in the fall of the upcoming academic year.

• **Karasia Kulis Advanced Degrees in Health Science Scholarship (Maximum of five (5) $10,000 scholarships may be awarded).** Applicants must be a current full-time graduate student enrolled at an accredited college or university in the United States pursuing a career as either an advanced practice nurse, anesthesiologist assistant, dentistry, nurse practitioner, occupational therapist, pharmacist, physician’s assistant, physical therapist, psychologist, public health nurse, social worker, speech pathologist, or be a student entering their first, second, or third year pursuing his/her doctorate in medicine, or related field.

• **Dr. John C. Kulis Medical School Scholarship (Maximum of four (4) scholarships of up to $25,000 may be awarded).** In addition to the General Eligibility Requirements above, Applicants must be a full-time second or third-year medical student who is attending an accredited United States medical school institution, be of Greek descent (either one or both parents must be of Greek heritage and applicants can be no more than 2nd generation Greek) and/or be of Eastern Orthodox faith, within the Greek Orthodox Archdiocese of America, American Carpatho-Russian Orthodox Diocese of the USA, or the Ukrainian Orthodox Church of the United States, and be a first generation medical student. Applicants must also demonstrate academic excellence. Applicants must submit all undergraduate, graduate and medical school transcripts as well as MCAT results. Applicants receiving this scholarship are required to fulfill a one hundred and twenty (120) hour community service requirement before beginning their residency program, at a medical institution, social service agency, or non-profit chosen by the Kulis Foundation.

**Required Documentation:**

• A letter of acceptance from your undergraduate, graduate, seminary, law school or medical school. (Only required for applicant’s first time entry into a U.S eligible educational institution

• Complete certified academic records, including undergraduate and/or graduate transcripts, past and present. High school seniors applying for an undergraduate scholarship shall provide certified academic records from their high school.
• Proof of enrollment at a U.S. eligible educational institution. This could include a class schedule, billing receipt, or any other documentation showing enrollment for the 2018-2019 academic year.

• Certified copies of your SAT/ACT/GMAT/GRE/LSAT or MCAT Scores (for 1st year Applicants).

• A completely filled-in Budget Form. The Budget Form is an Excel sheet that can be found on the Kulis Foundation’s website. This budget must be verified for accuracy. You must review and sign this form certifying the accuracy of information and amount provided.

• Current Student Loan Statement(s) including any interest charges

• A copy of your current Free Application for Federal Student Aid (“FAFSA”) or Student Aid Report (“SAR”).

• A copy or transcript of your Baptismal or Chrismation Certificate or evidence of your sacramental membership and participation in one of the above mentioned Eastern Orthodox churches. Not required for Applicants based on Greek Heritage. Such Applicants must provide evidence of their Greek Heritage.

• Applicants must prepare and include a detailed Resume or Curriculum Vitae.

• Applicants must include an essay response to the following prompt consisting of no more than 750 words, doubled spaced, in 12 point Times New Roman font:

   *The lessons we take from obstacles we encounter can be fundamental to later success. Recount and identify a time when you faced a challenge, setback, or failure. Explain how it affected you, how you overcame it, and what you learned from the experience.*

• Applicants may provide a narrative description of their financial need consisting of no more than 250 words, double spaced, in 12 point Times New Roman font. Financial need may be demonstrated in many ways and a list of possible ways is shown in the General Eligibility Requirements section on page 1 of this application.

• Applicants must include a total of three (3) Letters of Recommendation: one (1) from an academic source, one (1) from a religious source, and one (1) from a personal source. The letters of recommendation must be addressed to the Kulis Foundation Scholarship Committee and must address why the applicant should be awarded a scholarship. **Recommendation letters must be signed, recent, tailored to the scholarship you are applying for, demonstrate the recommender’s personal knowledge of the Applicant, and be prepared on official letterhead. Recommendations from previous years or for another scholarship or program will not be accepted.** Please choose individuals that best represent diverse aspects of your accomplishments and provide us with a true picture of your background. Please submit recommendations from the following sources:

1. Academic – from a professor, advisor, or program director.

2. Religious/Spiritual – from an Orthodox clergyman, lay leader, parish council member or other church official describing your church activities. Not required for applicants applying based on Greek Heritage. If you are unable to provide a letter of
recommendation from a religious source, please explain why and provide an additional letter from one of the other sources.

3. Personal, from someone who knows you well (not family or co-worker) or from a supervisor, manager or employer (for paid, unpaid, volunteer, intern, service, or other type of work).

**Recommendation letters can be sent directly to the scholarship committee from the individuals writing them or you can collect them and submit them with the rest of your application packet. In either case, the Applicant is responsible for ensuring that these letters, as well as all pieces of your application, are received by the Scholarship Committee.**

**Recommendations in the form of an email are not acceptable.**

Please send your completed packets with all of the documentation materials listed above, including the completely filled-in Application and Checklist as your coversheet, to:

By Mail: The Kulis Foundation  
c/o Scholarship Committee  
216 S. Jefferson Street Suite 301  
Chicago, Illinois 60661

By Email: info@kulisfoundation.org  
Subject Line: “Scholarship Application”

The applicant should be available for a telephone interview at the Committee’s discretion.

**Scholarship application packets must be postmarked by the April 1, 2018 deadline.** Late submissions or incomplete packets will not be accepted nor considered by the Scholarship Committee.

Scholarship Awards are determined and announced by July 31, 2018.

Scholarship Recipients’ Acceptance Agreements are due by August 15, 2018.

Scholarship Award Distribution Checks are issued and mailed to the Scholarship Recipients’ school by August 31, 2018.

All questions should be submitted in writing to the Scholarship Committee at info@kulisfoundation.org.
Application Checklist

Please print your name: __________________________________________

Use this Checklist to make sure all parts of your application have been completed, and all required documentation is included in the packet you send to us. Please print clearly on all submissions. This Checklist must be included with your completed application and all necessary documents. The deadline for submissions is April 1, 2018. The Scholarship Committee will not accept late applications nor will they consider incomplete submissions. Send the whole packet to:

By Mail: The Kulis Foundation c/o Scholarship Committee 216 S. Jefferson Street Suite 301 Chicago, Illinois 60661

By Email: info@kulisfoundation.org Subject Line: “Scholarship Application”

Choose One:  
- Robert Rizzie Memorial Undergraduate Accounting Scholarship Loyola University of Chicago Applicant
- Student in the Sciences Applicant
- St. Philip the Deacon Seminary Scholarship Applicant
- Graduate Applicant
- Karasia Kulis Advanced Degrees in Health Sciences Applicant
- Dr. John C. Kulis Medical School Scholarship

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<tr>
<th>Required Documents</th>
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<tr>
<td>A completely filled-in application</td>
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<tr>
<td>Complete Academic records (including both undergraduate and graduate if applicable) transcripts, past and present). Complete High School Academic Records are only required of High School Seniors entering college for the first time.</td>
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<td>Certified SAT/ACT/GMAT/GRE/LSAT/MCAT Test Results.</td>
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<td>Letter of Acceptance from your undergraduate, graduate or post graduate university (Required only for students entering their first year at or transferring to a new higher education institution. Proof of enrollment for students (all Applicants)).</td>
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<tr>
<td>A completely filled-in Budget form</td>
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<td>Current FAFSA and/or SAR</td>
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<td>A copy or transcript of your Baptismal or Chrismation Certificate or evidence of sacramental membership and participation in the GOA, ACROD or UOC</td>
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<td>Three (3) Letters of Recommendation (as detailed in the application procedures)</td>
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<td>A Resume or Curriculum Vitae</td>
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<td>Essay Response to Scholarship Prompt</td>
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<td>Narrative Description of Financial Need – (optional)</td>
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<td>Evidence of Student Loan Debt</td>
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Send the whole packet to:

By Mail: The Kulis Foundation c/o Scholarship Committee 216 S. Jefferson Street Suite 301 Chicago, Illinois 60661

By Email: info@kulisfoundation.org Subject Line: “Scholarship Application”
The Kulis Foundation Scholarship

Application Information

Complete all sections of this application, sign it, and return it along with all required documents.

APPLICANT DEMOGRAPHICS:

1. Applicant’s Name (first, middle, last): _______________________________________
2. Mailing Address: _____________________________________________________________________
3. Email Address: (The Kulis Foundation will communicate with you via email, please check your email regularly and provide prompt response) _____________________________________________________________________
4. Telephone Number: _____________________________________________________________________
5. Citizenship: U.S. Citizen or Permanent Resident or F-1 Visa holder
6. Date of Birth (MM/DD/YYYY): _____________________________________________
7. Place of Birth: _____________________________________________________________________

EDUCATIONAL BACKGROUND:

8. Undergraduate College/University:
   Name of University _____________________________________________________________
   Location (City & State) _____________________________________________________________________
   Date of Graduation: ___________ or Expected Date of Graduation: ___________
   Degree: ___________ Major: _____________________________________________________________

9. Graduate or Post Graduate College/University or medical school where you will be enrolled for the 2018-2019 academic year:
   n/a: Undergraduate Scholarship Application
   Name of University _____________________________________________________________
   Location (City & State) _____________________________________________________________________
   Expected Date of Graduation: ___________ Degree: ___________ Major: _____________________________________________________________________

10. Enrollment Status:
   ___ Enrolled full-time (indicate how much longer you have until you receive your degree)
       _____________________________________________________________________
   OR
   ___ Accepted for full-time beginning with the 2018-2019 academic year (indicate time it will take until you receive your degree)
       _____________________________________________________________________

Note: You must attach a letter from the university showing you are currently enrolled or will be enrolled for the upcoming academic year.
EDUCATIONAL BACKGROUND (cont.):

11. Scholastic Standing (attach all transcripts)
   • High School GPA Score: ______ points out of ______ points.
   • Undergraduate GPA Score: ______ points out of ______ points.
     n/a: First year undergraduate student in fall of upcoming academic year
   • Graduate GPA Score: ______ points out of ______ points.
     n/a: Graduate Scholarship Application

12. Test Scores: (circle applicable test)
   • SAT/ACT Score: ______ points out of ______ points
   • GMAT/GRE/LSAT/MCAT: Score: ______ points out of ______ points
     n/a: Graduate Scholarship Application

FAMILY INFORMATION:

13. Marital Status: (check applicable) ___ Married ___ Single ___ Divorced/Separated ___ Widowed

14. Total number of people in your family, including yourself: (Number) __________

15. Applicants seeking a scholarship based in part on being a member of a multi-child household must submit the following information about siblings attending undergraduate or graduate school: (proof of enrollment and evidence of annual costs is required)

<table>
<thead>
<tr>
<th>Name of Sibling</th>
<th>Age</th>
<th>School Attended</th>
<th>Year in School</th>
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16. Parent/Guardian’s Information:

   Father’s First & Last Name: ____________________________________________
     Address: _____________________________
     (City and Country/State Only)
     Current Occupation: ____________________________
     _____ Deceased

   Mother’s First & Last Name: ____________________________________________
     Address: _____________________________
     (City and Country/State Only)
     Current Occupation: ____________________________
     _____ Deceased

   Guardian’s First & Last Name: __________________________________________
     Address: _____________________________
     (City and Country/State Only)
     Current Occupation: ____________________________
RELIGIOUS AFFILIATION:

17. Jurisdiction: please indicate the jurisdictions listed below to which you belong/attend.

   __ Not Applicable – applying based on Greek Heritage or Descent
   * Provide certified documentation evidencing your Greek Heritage (See General Eligibility Requirements)
   __ Greek Orthodox Archdiocese of America
   __ American Carpatho-Russian Orthodox Diocese of the USA
   __ Ukrainian Orthodox Church of the United States

Parish name & address: __________________________________________________________
                              Parish Name

                              Address                          City, State

                              Parish Website

Parish Priest name & address: _________________________________________________
                              Name

                              Address                          City, State

                              Telephone Number                     Email Address

FINANCES

18. Average Hours Worked Per Week (if applicable): ________ __ paid or __ volunteer/intern

19. Have you taken out any student loans? ____ Yes ____ No
    If yes, indicate the amount of student loan debt you have incurred thus far:    $______________
    * Attach documentation evidencing your student loan debt to this Application

20. Have you applied for this scholarship program in the past? ____ Yes ____ No
    If yes, were you granted a scholarship? ____ Yes ____ No

21. Prepare a detailed budget showing expenses (tuition, fees, room & board, etc.) and sources of
    funding (scholarships, grants, loans, parents, etc.) See detailed instructions included on page 3
    of the packet. The Budget Form is located on the Kulis Foundation’s website.

22. List below any awards you have or will receive that will assist you financially while you are
    enrolled in your degree program. (do not list loans)

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<tr>
<th>Name of Award</th>
<th>Amount of Award</th>
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23. Are your parents or anyone else assisting you in any way with your tuition or your living expenses?  
   Yes  No

   If yes, please explain the extent of the assistance and for how long.

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

DISBURSEMENT & CONTACT INFORMATION

| University Name: ________________________________ |
| Student ID Number: ________________________________ |
| Student Account Number (if applicable): ________________________________ |
| Tuition Payment Address: ________________________________ |
| Name of Financial Aid Advisor: ________________________________ |
| Financial Aid Advisor Contact Information: |
|   Phone Number ________________________________ |
|   Email Address ________________________________ |
I authorize the Kulis Foundation to release application information, including copies of my application to the Kulis Foundation Scholarship Committee or agent thereof.

I agree to have the Kulis Foundation and/or the Kulis Foundation Scholarship Committee or agent thereof verify any and all of the application information given, including pertinent personal and financial information. The Kulis Foundation and/or the Kulis Foundation Scholarship Committee or agent may contact my employer(s), references, as well as schools cited herein to substantiate this information. I also understand that I may be required to authenticate information given by submitting copies of Federal Tax returns, FAFSA, SAR, evidence of student loan debt, test scores, transcripts, or any other relevant documents or statements.

I hereby certify that the information provided in this application and budget form is true and accurate and that I am the author of this completed application, budget, resume, and personal statement. I understand that if any information is found to be inaccurate or incomplete, the Kulis Foundation Scholarship Committee will deny me an award.

If awarded a Kulis Foundation Scholarship, I authorize the Kulis Foundation to publicize my name and the school I am attending in printed materials and on its website. The Kulis Foundation is committed to protecting the security and integrity of all information provided by an applicant. All financial information and/or documents disclosed to the Kulis Foundation through the application process, (“Protected Financial Information”) will be protected and kept confidential. The Kulis Foundation will not directly or indirectly sell, trade, or otherwise disclose your Protected Financial Information to outside parties without your written consent.

Signature of Applicant: _______________________________________________________

Printed Name of Applicant: __________________________________________________

Date: _____________