



# T. Wistar Brown Teachers' Fund

Application Deadlines: **Summer term: March 10**    **Spring/Fall/Winter term: June 10**

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## IMPORTANT INFORMATION ABOUT APPLYING TO THE FUND

### PURPOSE OF THE FUND

T. Wistar Brown specified the uses for his Fund as follows: ...To encourage young Quakers...who wish to qualify for teachers (12th grade and below) and are desirous of obtaining the needful instruction and cultivation to qualify them for the chosen profession. Quakers who are twenty-one years of age and older, and who have completed their undergraduate degree, and are (a) choosing the profession of teaching and desire to take a one-year course in a university or other preparation for their profession...(b) teachers wishing to attend summer schools or other places of instruction open during the vacation season (c) Quakers teaching who are of competent ability to profit by a summer at Woodbrooke, England.

Grants are also given for professional development programs offered by Quaker organizations, such as Pendle Hill Retreat Center and Friends Council on Education.

### ELIGIBILITY REQUIREMENTS

- Must be a member of a Quaker meeting
- Must be 21 years of age
- Must be teaching or be able to verify intent to enter the Pre-K thru 12th grade teaching field
- Must be planning a course of study in a credible institution with a documented history of academic rigor

***Grants are for tuition only, not for travel, lodging, or materials, and will be paid directly to the educational institution.***

### *Thank you for your interest in the Fund.*

This sheet will explain the most important details you will need to submit an application -- if you have any questions or concerns about the Fund's requirements, please send an email to: [info@friendsfiduciary.org](mailto:info@friendsfiduciary.org).

Each application must include all of the following, in one envelope, or in one electronic communication, along with your completed application:

- 1. Required for first time applicants or if you have not submitted such a letter for five years:**
  - a. an original, signed letter, on letterhead, certifying membership from the Clerk of your Monthly Meeting, Recorder or committee responsible for membership.
- 2. With every application:**
  - a. an original, signed letter of recommendation from the Principal of the school in which you are employed; or...
  - b. if you are not presently teaching, this original signed letter of recommendation must be from an educator well acquainted with you and your circumstances.

You will receive an affirmation letter, to be signed and returned, at the end of the semester affirming that you have successfully completed the courses listed on the application. If the courses are not completed, we ask that you return the grant to T. Wistar Brown Fund to be used by others.



# T. Wistar Brown Teachers' Fund

## GRANT APPLICATION

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**Spring/Fall/Winter term: June 10**

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***Grants are for tuition only, not for travel, lodging, or materials, and will be paid directly to the educational institution.***

This application **MUST** include:

- (1) an original, signed letter, on letterhead, certifying membership from the Clerk of your Monthly Meeting, Recorder, or committee responsible for membership.

***\*Required for first time applicants or if you have not submitted such a letter for five years.***

- (2) **with every application**, an original, signed letter of recommendation from the Principal of the school in which you are employed. If you are not presently teaching, this original signed letter of recommendation must be from an educator well acquainted with you and your circumstances.

***Applications lacking the above-noted documentation cannot be considered.***

**PLEASE LEGIBLY PRINT ALL INFORMATION**

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

Your full name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Home telephone number: (\_\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Your Monthly Meeting: \_\_\_\_\_ Quarterly Meeting: \_\_\_\_\_

### **VERY IMPORTANT: READ THE PURPOSE OF THE FUND BELOW:**

*T. Wistar Brown specified the uses for his Fund as follows:...To encourage young Quakers...who wish to qualify for teachers (12th grade and below) and are desirous of obtaining the needful instruction and cultivation to qualify them for the chosen profession. Quakers who are twenty-one years of age and older, and who have completed their undergraduate degree, and are (a) choosing the profession of teaching and desire to take a one-year course in a university or other preparation for their profession...(b) teachers wishing to attend summer schools or other places of instruction open during the vacation season (c) Quakers teaching who are of competent ability to profit by a summer at Woodbrooke, England.*

*Grants are also given for professional development programs offered by Quaker organizations, such as Pendle Hill Retreat Center and Friends Council on Education.*

Are you making application under provision ☐ (a) ☐ (b) ☐ (c) *check only one box*

- If (a) or (b) applies to you, please complete the information below:

Name of college/university: \_\_\_\_\_

Degree to be earned: \_\_\_\_\_

Address of College/University to send grant payment: \_\_\_\_\_

	Course 1	Course 2	Course 3
Length of Time of Study:			
Credits you will Earn:			
Credits Earned Towards:			
Purpose of your Study:			
Expected Graduation Date:			

Please check which period this request covers.

- ☐ Summer 20\_\_\_\_\_ *applications close March 10*
- ☐ Fall/Winter/Spring 20\_\_\_\_\_ *applications close June 10*

	Dollar Amount Requested	Payment Due Date
Fall/Winter		
Spring		
Summer		

What intention do you have to make elementary or secondary school teaching your career?

***Please be VERY SPECIFIC AND USE A SEPARATE SHEET OF PAPER.***

### EDUCATIONAL BACKGROUND AND YOUR EXPERIENCE

Education: High School *name & location* \_\_\_\_\_

College(s) & degree(s) earned \_\_\_\_\_

Graduate School(s) & degree(s) earned \_\_\_\_\_

Any non-teaching experience since college? \_\_\_\_\_

If you have taught previously, where & when? \_\_\_\_\_

Where & what are you teaching now? \_\_\_\_\_

Have you a contract for next year? \_\_\_\_\_ Where and what? \_\_\_\_\_

### TUITION COST AND YOUR FINANCES

Please tell us the tuition cost of your course of study for the *period covered by the application for this grant*: \$ \_\_\_\_\_

**HOW DO YOU EXPECT TO COVER TUITION COSTS?**

How much of the tuition will you:

1. cover from your own family income \$ \_\_\_\_\_
2. cover from contributions by your school \$ \_\_\_\_\_
3. cover from support by your Meeting, other Quaker sources, or non-Quaker sources \$ \_\_\_\_\_
4. Request to cover via a grant from the T. Wistar Brown Fund \$ \_\_\_\_\_

**HOW MANY ARE THERE IN YOUR IMMEDIATE FAMILY? # \_\_\_\_\_***NOTE: If you are single and emancipated, you needn't list your parents and siblings.*

NAME	AGE	RELATIONSHIP	OCCUPATION

**NOW, PLEASE TELL US ABOUT YOUR INCOME FROM THE LAST TAX YEAR***Please use the figure for total income from the IRS Form 1040, 1040A, or 1040EZ.*

Your income \$ \_\_\_\_\_

Your spouse's income \$ \_\_\_\_\_

Any other family income \$ \_\_\_\_\_

**TOTAL FAMILY INCOME** \$ \_\_\_\_\_

Tell us about any changes that you know or anticipate in these figures for the current year:

*Use another sheet if necessary.*


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Do you have any unusual financial circumstances?

*Use another sheet if necessary.*


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Is there anything else you think would be helpful for us to know when judging your application?

*Use another sheet if necessary.*


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By my signature below, I certify that the information provided above is true and correct.

**APPLICANT SIGNATURE:** \_\_\_\_\_**DATE:** \_\_\_\_\_**PLEASE RETURN WITH SUPPORT MATERIALS TO:**

Friends Fiduciary Corporation  
 Attn: T. Wistar Brown Teachers' Fund  
 1700 Market Street, Suite 1535  
 Philadelphia, PA 19103