THE AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

A PASTORAL FORMATION AND GRADUATE THEOLOGICAL DEGREE SCHOLARSHIP PROGRAM AT CATHOLIC THEOLOGICAL UNION CO-SPONSORED BY THE ARCHDIOCESE OF CHICAGO



ELIGIBILITY CRITERIA FOR THE AUGUSTUS TOLTON PASTORAL MINISTRY PROGRAM

Participation in the selection process begins with an inquiry by the potential candidate and completion of the application forms (recommendations, application) and an initial interview with the director. Upon recommendation by the director the potential 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 key 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 parttime 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 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 grade point average.
- □ (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 3 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

- **u** 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.
- **u** 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



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TOLTON 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)
- □ Request Transcripts to be submitted to CTU Admissions Office
- □ Complete Tolton Scholarship Application
- □ Complete Tolton Financial Form
- □ Complete 3 Recommendation Letters
 - □ Pastoral
 - \Box Academic
 - □ Ministerial
- □ Initial Interview with Director
- \Box Meet screening team in $2^{nd}/3^{rd}$ week of June.
- □ Decision made regarding Tolton Scholarship within two weeks of screening meeting.

Return/mail all these (applications, transcripts, recommendations) materials by May 31, 2012 to:

Dr. C. Vanessa White Director, Augustus Tolton Program Catholic Theological Union 5416 S. Cornell Chicago, IL 60615 PH: 773-371-5440 FX: 7734-324-4360 E-mail: tolton@ctu.edu





APPLICATION FOR SCHOLARSHIP

| Name: | | Date of Birth: | |
|-----------------------------|--|--|---------------|
| Address | | Phone: | |
| | | Work Phone: | |
| E-Mail: | | Cell Phone: | |
| Parish: | | Pastor | |
| Present Employment: | | | |
| Present Ministerial Involve | ement: | | |
| PREVIOUS EDUCATIONAL | L BACKGROUND , universities and graduat | ried DivorcedVov Yes Ages re schools in which you have beer | |
| SCHOOL AND LOCATION | DATES | COURSE DEGREE | DATE REC'D |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| EMPLOYMENT HIST(| | | |
| EMPLOYMENT HISTO DATE | DRY NAME OF EMPLOYER | Type Of Work | NET INCOME |
| | | Туре Of Work | NET INCOME |
| | | TYPE OF WORK | |

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 <u>separate sheet of paper</u>, please answer the following questions within your (minimum of 1000 and maximum of 2500 words) autobiography:

- 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 has been your role models? Your supports?
- 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 leadershi**p in the Archdiocese of Chicago, how do you see this scholarship/your theological study benefitting 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 degree 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 <u>Finance Sheet</u>; submit the three (3) letters of recommendation and this Scholarship Application form. *Return all these materials by May 31, 2012 to:*

Dr. C. Vanessa White Director, Augustus Tolton Program Catholic Theological Union 5416 S. Cornell Chicago, IL 60615 PH: 773-371-5440 FX: 7734-324-4360 E-mail: tolton@ctu.edu





FINANCIAL INFORMATION FORM

| Name: | | Social Secu | urity # | | |
|-----------------|------------------|-------------|--------------|-----|--------|
| Address: | | | | | |
| E-Mail: | | Phone: | | | |
| EMPLOYMENT HIST | TORY | | | | |
| Date | Name of Employer | | Type of Work | Net | Income |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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.).

| Source | Amount | Status |
|--------|--------|--------|
| | | |
| | | |
| | | |

| 2. | Will you own or operate an auto during the upcoming academic year? | Yes 🗌 No |
|----|--|----------|
| | If yes, give Make/Year | |

| Model | Remaining Indebtedness | • | Estimated operating cost per month (including monthly payment) | | |
|---------|--|----------------------|--|--|--|
| | | (| the sum of a single state of a second state of a | | |
| , , , , | overnment loans for education? Y btedness through student loans | res No . If yes, are | theypaiddeferred? | | |

STUDENT'S AND SPOUSE'S RESOURCES

| Students summer income from all sources after federal, state, FICA and local taxes. | 2020 (indicate projections with "*") |
|---|--------------------------------------|
| Student's academic year income from all sources after federal, state, FICA and local taxes. | |
| Spouse's total income after taxes. | |
| Student's total social security educational benefits | |
| 5. Student's total Veterans-GI Bill educational benefits. | |
| Financial assistance from student's parents, family, religious community. | |
| Income from non-CTU scholar- ships, 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

| <u>2(</u> | 0 - 20 Academic Year | | |
|-----------|-------------------------------------|-------|---------------------|
| 1. | Tuition and Fees | | Fall Tuition Cost |
| | Spring Semester Other Academic Fees | | Spring Tuition Cost |
| 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 | |



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.

| Date | Signed | |
|-----------------------------------|--|--|
| | Address | |
| Institution | | |
| Position | | |
| Telephone | E-Mail | |
| Please return by May 31, 2012 to: | Dr. C. Vanessa White Director, Augustus Tolton Program Catholic Theological Union 5401 S. Cornell Chicago, IL 60615-5698 773-371-5440 Fax: 773-324-4360 <u>tolton@ctu.edu</u> | |



THE AUGUSTUS TOLTON PASTORAI 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.

6. Briefly describe how you know the applicant.

7. Briefly describe a situation in which she/he has "ministered to you."

- 8. 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

9. What are the applicant's strengths and areas in which she/he needs to develop?

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

11. Additional comments:

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

| Date | Signed | |
|-----------------------------------|---|--|
| | Address | |
| Parish/Agency | Ministry | |
| Phone | E-Mail: | |
| Please return by May 31, 2012 to: | | |
| | Dr. C. Vanessa White | |
| | Director, Augustus Tolton Program Catholic Theological Union | |
| | 5401 S. Cornell | |
| | Chicago, IL 60615-5698 | |
| | 773-371-5440 | |
| | Fax: 773-324-4360 | |
| | <u>tolton@ctu.edu</u> | |





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□

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

No 🗌

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.

| Date | Signed | |
|-----------------------------|-----------------------------------|--|
| Parish | Ministry | |
| Address | | |
| Phone | E-Mail | |
| Please return by May | 31, 2012 t o: | |
| | Dr. C. Vanessa White | |
| | Director, Augustus Tolton Program | |
| | 5401 S. Cornell Avenue | |
| | Chicago, IL 60615-5698 | |
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