

**THE “DYNAMIC” DAYTONA BEACH District**  
**CENTRAL ANNUAL CONFERENCE ELEVENTH EPISCOPAL DISTRICT**  
**AFRICAN METHODIST EPISCOPAL CHURCH**

**SCHOOL YEAR**  
**2025**

Reverend Cato Mott, Sr.

**Scholarship Application**  
**2025**



**Bishop Marvin C. Zanders II, Presiding Prelate**  
**Mrs. Winifred H. Zanders, Episcopal Supervisor**  
**The Rev. Dr. Lorenzo Laws, District Presiding Elder**  
**Mrs. Lutricia Laws, District Consultant**

The Daytona Beach District will award one (1) scholarship for \$1,000 in memory of The Reverend Cato Leamon Mott, Sr. and two (2) scholarships for \$500 each. All applicants will be evaluated using the following criteria:

**I. Graduation Status:**

- A. Eligible for graduation from high school in the year the award is granted.
- B. Verified intent to enroll in a community college or college/university of the applicant's choosing within three months of graduation from high school. (\*\*\*) Award contingent upon documented enrollment in college by Fall Term 2025. Submit a letter of acceptance, if applicable.)
- C. Verified 2.5 grade point average or above. (Submit an official high school transcript.)

**II. Church Engagement:**

- A. Currently a member of an A.M.E. church in the Daytona Beach District.
- B. Currently participating in at least **TWO** church ministries (e.g., Church School, Choir, Usher Board, Young People's Division (Y.P.D.), Boy Scouts/Girl Scouts, RAYAC, Bible Study, Media/Audio Visual, or Liturgical Dance) and making significant contributions of their talent and service.

**III. Financial Need:**

- A. Applicant's statement of financial need or hardship.

**IV. Character Profile:**

- A. Demonstrated strength of Christian character (Submit **TWO** letters of recommendation - one from the applicant's **PASTOR** and another from the **HEAD OF A MINISTRY** in which the applicant is involved).
- B. Demonstrated strength in ethical principles and personal responsibility (Submit **ONE** letter of recommendation from a principal/assistant principal, guidance counselor, or teacher).

All applicant materials must be received by **Saturday, May 31, 2025.**



## Applicant's Responsibility

**The Applicant is responsible for the following:**

1. Completing and returning application by **May 31, 2025**, to:  
**Email: Rev. Dr. Kimberly Stockton at [revdrkstock@gmail.com](mailto:revdrkstock@gmail.com)**  
**(\*please note in email Subject: Scholarship Application)**  
**-OR-**  
**Mail to:**  
**Rev. Kimberly Stockton**  
**1229 Weeping Willow LN**  
**Rockledge, FL 32955**
2. Securing and submitting all requested verifications needed:
  - a. Acceptance Letter to College/University
  - b. **Official** High School Transcript showing a minimum of 2.5 G.P.A.
3. Securing and submitting all requested letters of recommendation:
  - a. Pastor
  - b. Head of Ministry
  - c. School Official
4. Responding in a timely manner to any follow-ups that may be requested by the Daytona Beach District Scholarship Committee.
5. All applications **MUST** be emailed or postmarked on or before **May 31, 2025**.



## 2025 Scholarship Application Form

Please complete this fillable form below or you may print and complete neatly using black or blue ink. Type your responses to items 12 and 15 on a separate piece of paper.

1. **Name:** \_\_\_\_\_
  
2. **Address:** \_\_\_\_\_  
\_\_\_\_\_
  
3. **Home Phone:** (\_\_\_\_) \_\_\_\_\_  
**Mobile Phone:** (\_\_\_\_) \_\_\_\_\_
  
4. **Church:** \_\_\_\_\_
  
5. **Pastor:** \_\_\_\_\_
  
6. **High School:** \_\_\_\_\_
  
7. **Principal:** \_\_\_\_\_
  
8. **G.P.A.** \_\_\_\_\_ **SAT Score** \_\_\_\_\_ **OR** **ACT Score** \_\_\_\_\_
  
9. **Date of Graduation:** \_\_\_\_\_

10. Name of college/university you plan to attend:

Verification of Acceptance: \_\_\_\_\_ Yes \_\_\_\_\_ No

(If “yes”, please attach a copy of verification. If “no”, please explain.)

11. List the church activities in which you participate:

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

12. Describe your need for financial assistance to support your education. Explain how the scholarship will help you achieve your goals. (Use a Separate piece of paper)

13. Give the name and position of the Head of a Ministry from your church who will be writing a letter of recommendation.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

14. Give the name and position of the person from your school who will be writing a letter of recommendation.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

15. Write an essay (500 – 1000 words) describing how you believe:  
1) the teachings of Christ, 2) your engagement in the African Methodist Episcopal Church and 3) your life experiences have prepared you to be successful in college. (Separate piece of paper)

Your signature and the signatures of your Pastor and Christian Education Director (or Church School Superintendent) denote that the application has been completed according to the guidelines for submission.

\_\_\_\_\_  
Applicant’s Signature & Date

\_\_\_\_\_  
Christian Ed. Director Signature & Date

\_\_\_\_\_  
Pastor’s Signature & Date