

ST. FRANCIS CHURCH SCHOLARSHIP COMMITTEE

NORTON ST. FRANCIS OF ASSISI SCHOLARSHIP APPLICATION

(This scholarship will be awarded on basis of financial need, morals and active participation in church youth groups - see reverse side for further details).

Name: _____ Date of Birth: _____
Address: _____ City/State/Zip: _____
Telephone: _____ Cell Phone: _____
High School Attended: _____ Year Graduated: _____
Number in Class: _____ Rank in Class: _____ Cumulative GPA: _____
Name of School you plan to attend: _____
Date you plan to enter school: _____ Course of study: _____
Name of Parents or Guardians: _____
Occupation of Parents or Guardians: _____

On a separate sheet state:

1. Why you are applying for this scholarship
2. Explain how your life in the community reflects your faith

List other scholarships applied for and received:

Please list the names of three people for references:

Name: 1. _____ 2. _____ 3. _____
Address: _____
City/State: _____
Phone: _____

Give each person listed above, the recommendation form to fill out and return to the church.

Signature of Applicant _____ Date _____

Signature of Parent, Spouse or Guardian _____ Date _____

A high school transcript and a college transcript, if in college, must be submitted with the application.