Saint Joseph Parish Scholarship Application

St. Joseph Parish is pleased to be able to offer some financial assistance, in the form of scholarships, to high school seniors going to college and those currently enrolled in college. This year we have voted to award a minimum of \$500 in scholarships.

The following criteria and procedures are to be completed in full and returned to St. Joseph Rectory office <u>no later than noon on April 1, 2025</u>

Criteria and Procedure:

- 1) Student must be a member in good standing in our Parish community.
- 2) Student must have actively participated in community services; preferable but not limited to function in our Parish.
- 3) Applicant may be currently enrolled or a graduating senior.
- 4) Applicant must have received Confirmation.
- 5) Payment will be made to the student upon proof of successful completion of the first semester (maintaining a GPA or 2.0 or higher.). An original transcript must be received by the committee no later than April 3, 2024, of the year following the award.
- The scholarship committee will have the final decision regarding scholarship recipients.
- 7) Applications, completed in full, must be returned to St. Joseph Parish Office, 34 Monroe Avenue, Shelburne Falls, MA 01370, by April 5, 2024. Please write **Attention Scholarship Committee** on the envelope.

Instructions

Applicants must complete this form in its entirety or it shall be considered null and void.

| 1. | Name | | | |
|-----|--|--|--|--|
| 2. | Town of Residence | | | |
| | Mailing Address | | | |
| | | | | |
| 3. | Father's Name | | | |
| | Home Address | | | |
| | Occupation | | | |
| 4. | Mother's Name | | | |
| | Home Address | | | |
| | Occupation | | | |
| 5. | Guardian's Name | | | |
| | Home Address | and the same of th | | |
| 6. | Parents' combine annual gi | ross income | | |
| 7. | How many children in the family (including yourself) | | | |
| | List ages Number of children in college or other post high school educational institutions | | | |
| | Number of children in college of other post high school educational measures. | | | |
| | next fall, including yourself: | | | |
| | List colleges to which you have applied: | | | |
| 8. | | | | |
| | a | d | | |
| 9. | List colleges to which you have been accepted: | | | |
| | a | b | | |
| | h | a | | |
| 10. | | to attend if accepted: | | |
| 11. | DO NOT THE RESIDENCE OF THE PARTY OF THE PAR | Anticipated Income. | | |
| 11. | Tuition | Help from family | | |
| | Room & Board | You have saved | | |
| | Books & Fees | Plan to earn | | |
| | Thabian | Scholarships & Loans | | |
| 12. | All to this application | form, a list of all school and community service activities | | |
| | in which you have participated. Include any distinctions of honors you have won, | | | |
| | ss: Later work experience and hobbles | | | |
| 13. | Include at least two letter | 's of reference: one from a parismoner and another non- | | |
| | family member, and a cor | by of your most recent school transcript. | | |
| 14. | State any special consider | rations as to why you are deserving of this scholarship. | | |
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| | | | | |

| Signature of Applicant | Date | n - 47 |
|------------------------------|------|--------|
| Signature of Parent/Guardian | Date | r |

I understand the Parish will treat the information on this form as confidential. I acknowledge that the above information is true to the best of my knowledge.