



Holy Spirit Catholic Parish Avon Lake, Ohio

2023/2024 School Year
SCHOLARSHIP REQUEST FORM

I. APPLICANT INFORMATION

NAME _____

LAST

FIRST

MIDDLE

ADDRESS _____

STREET

CITY

STATE

ZIP CODE

DATE OF BIRTH _____ E-MAIL ADDRESS _____

CELL PHONE _____ WORK PHONE _____

FINANCIAL ASSISTANCE REQUEST FOR: NAME AND ADDRESS OF EDUCATIONAL PROGRAM, SCHOOL or COLLEGE

School Name _____

School Address _____

Tuition/Yr.: _____ Room & Board/Yr.: _____

Student ID # _____ or SS # _____

Explain the type of educational program you are requesting assistance for:

Other funds being received for tuition assistance? ____ Yes ____ No

Grants	\$ _____	From where	_____	_____
			Name	Address
Grandparents	\$ _____	From where	_____	_____
			Name	Address
Scholarships	\$ _____	From where	_____	_____
			Name	Address
Other Awards	\$ _____	From where	_____	_____
			Name	Address
Total	\$ _____	(from all sources)		

ATTACH A COPY OF APPLICANT'S TAX RETURN

APPLICANT'S ANNUAL INCOME: (PLUS SPOUSE IF APPLICABLE)	Less than \$20,000	_____
	\$20,000 - \$40,000	_____
	\$40,000 - \$60,000	_____
	\$60,000 +	_____

APPLICANT'S EMPLOYER:

Name _____

Address _____

APPLICANT'S SIGNATURE _____ DATE _____

**Holy Spirit Catholic Parish
Avon Lake, Ohio**

**2023/2024 School Year
SCHOLARSHIP REQUEST FORM**

II. PARENT OR GUARDIAN FINANCIAL INFORMATION

(REQUIRED IF APPLICANT IS CLAIMED AS A DEPENDENT ON
PARENT'S OR GUARDIAN'S TAX RETURN OR IS LESS THAN 18 YEARS OLD.)

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP CODE

E-MAIL ADDRESS _____

CELL PHONE _____ **WORK PHONE** _____

ADJUSTED GROSS INCOME OF PARENTS OR GUARDIANS:

LESS THAN	\$20,000	_____
\$20,000 -	\$40,000	_____
\$40,000 -	\$60,000	_____
\$60,000 -	\$80,000	_____
\$80,000 -	\$100,000	_____
\$100,000 -	\$150,000	_____
OVER	\$150,000	_____

1.) ATTACH A COPY OF BOTH THE APPLICANT'S (AND IF APPLICABLE) SPOUSE'S OR PARENT'S/GUARDIAN'S CURRENT 1040 FORM.

2.) PLEASE EXPLAIN ANY UNUSUAL FINANCIAL OBLIGATIONS THAT EITHER PARENTS/GUARDIANS OR THE APPLICANT HAVE AT THIS TIME.

I HEREBY CERTIFY THAT THE INFORMATION I HAVE SUBMITTED IS CORRECT. I AUTHORIZE THE RELEASE OF THIS INFORMATION TO THE MEMBERS OF THE SCHOLARSHIP APPLICATION COMMITTEE OF HOLY SPIRIT PARISH.

APPLICANT'S PARENT/GUARDIAN SIGNATURE _____ **Date** _____

**Holy Spirit Catholic Parish
Avon Lake, Ohio**

2023/2024 School Year
SCHOLARSHIP REQUEST FORM

PLEASE WRITE AN ESSAY ON THE ROLE THAT FAITH PLAYS IN YOUR LIFE, YOUR ACADEMIC AND CAREER GOALS, AND HOW THESE COME TOGETHER. (IMPORTANT POINTS TO INCLUDE: YOUR PARTICIPATION IN SUNDAY MASS; YOUR PRAYER LIFE; YOUR PARISH AND VOLUNTEER ACTIVITIES; HOW YOUR FAITH IMPACTS YOUR DAILY LIFE; HOW YOU SEE YOUR FAITH AND ACADEMIC GOALS INTERACTING WITH EACH OTHER.)

- **Please type or print all information. Complete all items on this form; attach a copy of both the applicant's and the parent's/guardian's current 1040 form and the essays.**
- **Return completed packet to Holy Spirit Parish office in an envelope marked to the attention of the Scholarship Application Committee.**

COMPLETED PACKET CHECKLIST

- 1.) A COPY OF APPLICANT'S 1040 FORM**
- 2.) A COPY OF APPLICANT'S PARENT'S/GUARDIAN'S 1040 FORM**
- 3.) ESSAY**
- 4.) COMPLETED AND SIGNED APPLICATION FORMS**

THE SCHOLARSHIP APPLICATIONS WILL NOT BE PROCESSED WITHOUT ALL THE REQUIRED INFORMATION.