

ST. MARY'S CATHOLIC WOMEN'S GUILD
SCHOLARSHIP APPLICATION

PLEASE SUBMIT TO:

ST. MARY'S CATHOLIC WOMEN'S GUILD
SCHOLARSHIP COMMITTEE
C/O ST. MARY'S RECTORY
83 CENTRAL STREET
FOXBOROUGH, MA 02035

APPLICATIONS MAY ALSO BE FOUND AT:

WEBSITE ADDRESS: WWW.STMARYSFOXBORO.ORG

HARD COPIES AT THE REAR DOORS OF THE CHURCH

AND AT THE RECTORY: PLEASE NOTE RECTORY HOURS ON WEBSITE.

St. Mary's Women's Guild Scholarship Committee is once again offering two scholarships in the amount of \$2,000. each.

IN ORDER TO APPLY FOR THIS SCHOLARSHIP, YOU MUST HAVE COMPLETED AT LEAST ONE YEAR OF FORMAL EDUCATION BEYOND HIGH SCHOOL, BUT ARE NOT YET ENGAGED IN POST-BACHELOR'S GRADUATE STUDY.

ALL QUESTIONS ON THIS FORM MUST BE FILLED OUT **COMPLETELY** FOR THIS APPLICATION **TO BE CONSIDERED!** BE SURE TO SEE THE CHECK LIST ON PAGE 3. YOUR ANSWERS WILL BE KEPT IN STRICT CONFIDENCE. A PERSONAL INTERVIEW MAY BE EXPECTED OF THE FINALISTS. APPLICATIONS FOR THE ACADEMIC SCHOOL YEAR 2018-2019 MUST BE RETURNED BY MONDAY, JUNE 17, 2019.

SCHOLARSHIP APPLICATION 2019-2020

APPLICANT'S NAME: _____

LOCAL ADDRESS: _____

TELEPHONE NUMBER _____

EMAIL ADDRESS: _____

APPLICANT'S SIGNATURE: _____

PARENT/GUARDIAN: _____

Parent/Guardian Signature: _____

DATE: _____

WHAT IS THE NAME OF THE SCHOOL YOU ATTEND? _____

WHERE IS IT LOCATED? _____ (CITY & STATE).

I. EXPENSES :	<u>THIS YEAR</u>	<u>LAST YEAR</u>
TUITION & FEES:	\$ _____	\$ _____
ROOM & BOARD:	\$ _____	\$ _____
BOOKS/SUPPLIES:	\$ _____	\$ _____
 TOTAL	 \$ _____	 \$ _____
 SCHOLARSHIPS AND GRANT	 \$ _____	 \$ _____
LOANS	\$ _____	\$ _____
NET EXPENSES	\$ _____	\$ _____

II. ACADEMIC PROGRESS SHOWN

A COPY OF YOUR MOST RECENT TRANSCRIPT MUST BE PROVIDED UPON SUBMISSION OF THIS APPLICATION.

MAJOR _____

MINOR OR AREA OF CONCENTRATION _____

III. PROXIMITY OF GOAL

YOUR CAREER GOAL IS TO BECOME A(N) _____, WHICH WILL REQUIRE A MINIMUM OF _____ ADDITIONAL YEARS OF FORMAL EDUCATION.

IV. GENERAL QUESTIONS:

A: THE FOLLOWING PEOPLE LIVING IN FOXBOROUGH (NOT RELATIVES) WHO BEST KNOW YOUR CIRCUMSTANCES AND WOULD BE WILLING TO BE CONTACTED AS REFERENCES FOR YOU ARE:

1. _____

NAME & TELEPHONE NUMBER

2. _____

NAME & TELEPHONE NUMBER

PLEASE PROVIDE A LETTER OF RECOMMENDATION FROM ONE OF THE ABOVE NAMED REFERENCES

B. PERSONAL STATEMENTS: THE FOLLOWING QUESTIONS ARE EXTREMELY IMPORTANT AND MUST BE ANSWERED TO BE CONSIDERED FOR THE SCHOLARSHIP. ATTACH EXTRA SHEET IF NECESSARY.

1. WHAT CIRCUMSTANCES EXIST THAT WOULD HELP TO DEMONSTRATE TO THE COMMITTEE YOUR NEED FOR FINANCIAL ASSISTANCE? (EXAMPLES: OTHER FAMILY MEMBERS IN COLLEGE, SINGLE-PARENT FAMILY, PARENT UNEMPLOYED, LIMITED INCOME, OTHER EXTENUATING CIRCUMSTANCES).

2. WHAT SERVICES, IF ANY, HAVE YOU PROVIDED TO ST. MARY'S PARISH, THE FOXBOROUGH COMMUNITY, YOUR SCHOOL COMMUNITY ETC. ?

3. WHAT ADDITIONAL INFORMATION DOES OUR COMMITTEE NEED TO KNOW ABOUT YOU TO HELP US DETERMINE THAT YOU WOULD BE THE BEST RECIPIENT OF OUR SCHOLARSHIP?

**CHECK LIST
HAVE YOU:**

- ANSWERED ALL QUESTIONS ON THIS FORM _____
- INCLUDED A COPY OF YOUR MOST RECENT TRANSCRIPT _____
- INCLUDED A LETTER OF RECOMMENDATION FROM A FOXBORO RESIDENT _____