



Saint Joseph

Catholic School Scholarships

For the families of Saint Joseph Cathedral, for Manchester Catholic Schools

SCHOLARSHIP APPLICATION

Student Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Current School: _____ Grade: _____

Parent 1 Name: _____ Parent 2 Name: _____

1. Catholic School student is looking to attend: _____

2. Have you received a financial aid award letter from the school? ___yes ___no | if yes, please attach a copy of the letter.

3. *In most cases, students cannot expect to have the entirety of their tuition balance covered by the scholarship. Please list the amount you are wishing to have covered.* Requested Scholarship amount: _____

4. Is there anything you feel the committee should be confidentially made aware of that will help in the review of your scholarship (i.e. reasons for financial distress, extenuating circumstances, change of income, etc.)?

5. **Student Statement: why attending a Catholic school is important to me** (if more space is needed, please attached a sheet of paper to this application)

Please return completed application and any necessary attachments to the Parish Office