



# Scholarship Application for St. Mary's Church

Thank you for applying for a scholarship from St. Mary's Church for the 2022/2023 school year. May God Bless you as you continue your educational journey! Please mail a official digital transcript to [scholarship@stmarysglensfalls.org](mailto:scholarship@stmarysglensfalls.org)

## Personal Information

### Name \*

First Name      Last Name

### Address \*

Street Address

Street Address Line 2

City                      State / Province

Postal / Zip Code

### Phone Number \*

Please enter a valid phone number.

### Email \*

example@example.com

**Is the applicant a registered member of St. Mary's Parish in Glens Falls, NY? \***

Yes

No

## **Educational Information**

**Is the applicant a graduate of St. Mary's / St. Alphonsus Regional Catholic School? \***

Yes

No

**School that the applicant currently attends**

**Current Grade / Year**

**College, Trade School, or Program that the applicant plans to attend in the Fall \***

**Please list educational goals \***

## **Family Information**

**Full Name of Parent/Guardian #1 \***

First Name

Last Name

**Occupation of Parent/Guardian #1 \***

**Place of Employment of Parent/Guardian #1 \***

**Full Name of Parent/Guardian #2**

First Name      Last Name

**Occupation of Parent/Guardian #2**

**Place of Employment of Parent/Guardian #2**

**Please List Any Siblings (Full Name, Age, and School They Attend)**

**Financial Information**

**Cost of Tuition for the Program/School applicant will attend in the Fall (Please enter the dollar amount.) \***

**Yearly Room & Board Cost at Program/School applicant will attend in the Fall (Please enter the dollar amount.) \***

**Yearly Cost of Books (Please enter the dollar amount.) \***

**Total Yearly Costs (Please add all costs from the ABOVE questions.) \***

**Additional Fees (Please specify item and cost.) \***

**Yearly Aid from Scholarships or College/Program/Trade School - (This is the dollar amount the applicant is receiving from the college or other scholarship sources - not including loans, or parent/guardian/student contributions) \***

**Expected Yearly Deficit (This equals the total yearly costs minus yearly aid from scholarships, etc.) \***

**PARENTS, please provide the Adjusted Gross Income from your most recent tax return. If you are separated or divorced, please provide BOTH parents'/guardians' Adjusted Gross Incomes. (From form 1040 or Form 1040-5R, line 11) If this is not provided, financial need will be assessed at zero. \***

**State any unusual circumstances in your family that could affect your need for assistance. Enter "none" if this does not pertain to you. \***

## **Personal Experience**

**Please list any volunteer community service you have performed over the past year, and indicate the number of hours in each activity. Describe the impact it may have had on your life. (Limit response to 150 words.) \***

0/150

**Indicate your academic goals and your career goals upon graduation, and your plans for achieving them (Limit response to 75 words.) \***

0/75

**Describe the impact your Catholic faith has had on your life. (Limit response to 100 words.) \***

0/100

**Visit Father Scott's channel on YouTube (accessible on [stmarysglensfalls.org/livestream-media](https://stmarysglensfalls.org/livestream-media)) Choose a video, indicate which one it was, reflect & share your comments in the answer box below: \***

## **Attestation to Financial Information**

Parents/Guardians and Applicants - Please sign below to confirm the following statement: We hereby affirm all information is true and accurate.

