

ST. MARY'S CATHEDRAL SCHOLARSHIP APPLICATION

Part 1 – Please Print

Name: Last	First	Middle
Father's Name	Mother's Nam	e
Mailing address:		
City/State/Zip Code:		
Home Phone:	Cell Phone:	
High School Attending:		
Date of Graduation:		
Sacraments Received:		
Reference 1:Name	Address	Phone
Reference 2:		
Name	Address	Phone
Reference 3:		
Name	Address	Phone
By my signature I certify that I a	m a registered member of St. Mar	y's Cathedral.
I also agree, should it be necessarequested to do so.	ry, to be available for a personal in	nterview before the Scholarship Committee, if
Signature of Applicant		
RETURN YOUR APPLICATI April 8,2021	ON AND 3 LETTERS OF REFI	ERENCE NO LATER THAN Date Received
Applications will be judged and announce for receiving your scho		udents will be notified by mail. A mass date will

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Part 2 – Type at least one page (no hand-written papers will be accepted) describing your involvement in the following:

- 1. Parish
- 2. Family
- 3. School
- 4. Community

******<u>Remember to return all three letters of recommendations with your application.</u>

Return your application to: St. Mary's Cathedral 112 South Cedar Grand Island NE 68801

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Part 3 – Recommendation Form – to be given to the persons you are asking for a recommendation. *You are free to make copies of this form.*

The following student recommendation for him/her as part of an apawarded by St. Mary's Cathedral. Please ty applicant. Please include your opinion of the Parish, their family, school, and community	pplication for one of the pe at least one page we candidate's service we	ith your opinion of the
This form is to be turned in no later than Ap	oril 8, 2021	
Please return this signed sheet along with your return to the student. Students are responsible recommendations with their application.	• •	ation and
Signature	Date	_
Printed name	Phone	