

# SCHOLARSHIP APPLICATION

## SAINT PETER PARISH

(Please type or print clearly)

***Application Deadline: June 15, 2020 at 5:00 P.M.***

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
First Name, Middle Initial, Last Name

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

### **In addition to this form, your Application Packet must contain:**

#### I. Academic Records.

College Students – Enclose an official transcript from your present or most recent attended school.

High School Students – Enclose a copy of your most recent Report Card.

#### II. Letter of Recommendation

All scholarship applicants must obtain **two** letters of recommendation. Letters can be from a teacher, clergy, employer or sports coach.

#### III. Essay Questions

Your answer to each question must be 250 – 300 words, double spaced, with 1” margins written in Times New Roman 12 point font.

1. How has the Covid-19 Pandemic impacted or changed how you view the world?
2. What qualities do you look for in a person in order for them to be called your friend?
3. What one thing have you learned from the people of St. Peter Parish that has helped you become an adult?

#### IV. Other

Please include a list of extra-curricular/volunteer activities that you have been involved in for the past four years.

Applicant must be a child of an active parishioner of St. Peter Parish (Applicant and parents must attend mass regularly).

**PLEASE NOTE:** Scholarship monies may be used for the following: tuition, books, required lab fees and required supplies.

**The application packet must be submitted complete. Incomplete applications will not be considered.**

**EDUCATIONAL BACKGROUND**

The educational institution you are currently attending:

High School/College: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

The educational institution you plan to attend next year:

College: \_\_\_\_\_ Major: \_\_\_\_\_

Have you been accepted? \_\_\_\_\_ If not, when do you expect to hear? \_\_\_\_\_  
(If yes, attach copy of acceptance letter from the college)

**STATEMENT OF ELIGIBILITY** Applicant must be a child of an active parishioner of St. Peter Parish, 3655 Oberlin Avenue, Lorain, Ohio (Applicant and parents must attend mass regularly).

*On my honor, I can testify that I am a practicing catholic and that my family is active at St. Peter Parish, 3655 Oberlin Avenue, Lorain, Ohio, with time, talent, treasure, and attendance.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

*I hereby give the St. Peter Parish permission to contact any of my teachers, supervisors, professional and educational institutions I have attended or applied to or have been accepted for admission, for further information about my attendance, performance, financial circumstances and references. I further understand that if, for any reason, I withdraw from the specific program or course to which this application applies, the remaining amount of this scholarship must be returned to the St Peter Parish at 3655 Oberlin Avenue, Lorain, Ohio 44053. Falsification of any information may result in cancellation of the scholarship. **“This award may be taxable as regular income”** per IRS regulations.*

*I grant the St. Peter Parish permission to use my photograph in any further scholarship promotion.*

Applicant’s signature: \_\_\_\_\_ Date: \_\_\_\_\_

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***Should you have any questions regarding this application, please feel free to email Marlene Karpinski at [mckarpinski@stpeterlorain.org](mailto:mckarpinski@stpeterlorain.org) or call the St. Peter Parish Office at (440) 282-9103 Ext. 116. Mail applications to St. Peter Parish – 3655 Oberlin Avenue – Lorain, Ohio 44053***

**The application packet must be submitted complete. Incomplete applications will not be considered.**