St. Paul's Ladies Guild Memorial Scholarship Application

The scholarship fund granted by St. Paul's Ladies Guild is an expression of faith in Jesus Christ, in St. Paul Catholic Church's mission, and in the potential of young men and women of our congregation. St. Paul's Ladies Guild intentions are that the awards be made to individuals who show evidence of the following:

- 1. Good moral character
- 2. Regular participation within the parish of St. Paul's Catholic Church
- 3. Academic excellence, diligence, achievement, or ability

Applicant Name:
Contact Information Address:
Home phone number:
Personal cell number:
Email address:
Family Information Father's name:
Address:
Home phone or cell contact information:
Mother's name:
Address:
Home phone or cell contact information:

Siblings:	
Name:	Age:
Name:	
Name:	Age:
Name:	Age:
Name:	Age:
Academic Information School Attended:	
Diploma Type to be Farned:	
Diploma Type to be Earned: AC	T Score
Honors Earned:	
Club and Sport Participation:	
Plans for Coming Year College or University:	
Have You Been Accepted:	
Intended Area of Study::	
Why did You Choose this Area of Study:	
Employment Information	
Have you been employed while in high school?	
Place(s) of employment:	
Place	Dates

Do you intend to work n	ext year?
Spiritual Life Informati	ion
Do you attend mass reg	
	s and/or communities service projects you are involved in.
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Describe a time in your beliefs and spiritual life that have shaped who you are as a person.	
Additional Information You would like to Share with the Committee:	