

Helen Omilian Memorial Rosary Altar Society Scholarship
Application

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Age: _____ E-mail: _____

Home Phone: _____ Other Phone: _____

By submitting this application for consideration, I confirm that I am an active member of Our Lady of Lourdes parish family. I agree to accept any decisions of the Scholarship Committee.

Student Signature: _____

Parent/Guardian Signature: _____

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Have you been accepted as a full-time student (minimum of 12 credits) to a trade school, community college, four year college or university for the fall semester?

Yes _____ No _____

Please list school(s) accepted at:

<u>School Name</u>	<u>City, State</u>	<u>Attending? (Yes or No)</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Briefly explain how this scholarship will be used to help you further your education.

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Church Activities- Please describe all parish activities you have participated in at Our Lady of Lourdes and indicate how long you took part in them. *(If additional space is needed, please attach additional sheet.)*

Community Activities- Please describe all community/school/job activities you have participated in and indicate how long you took part in them. *(If additional space is needed, please attach additional sheet.)*
