

**St. Catherine Scholarship Fund**  
**Four Riverside Avenue**  
**Riverside, CT 06878**

**Scholarships and Awards**  
**Application**

The St. Catherine Scholarship Fund provides scholarships and awards to graduating high school seniors who have demonstrated academic excellence and leadership skills through their participation in church, school and community service activities. Preference is given to those students whose families are members of St. Catherine of Siena parish in Riverside, Connecticut. The scholarships and awards are funded by contributions from individual parishioners and corporate donors to the St. Catherine Scholarship Fund. Applicants may visit our website [www.stcath.org/scholarshipfund](http://www.stcath.org/scholarshipfund) for a list of the Scholarships and Awards and the criteria for eligibility.

Please return your completed application to the St. Catherine Scholarship Committee, Four Riverside Avenue, Riverside, CT 06878 postmarked no later than **May 2, 2011**.

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Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Citizenship: U.S. \_\_\_\_\_ Other \_\_\_\_\_

Name of High School: \_\_\_\_\_

Address of High School: \_\_\_\_\_ Zip code: \_\_\_\_\_

GPA \_\_\_\_\_ Class Rank \_\_\_\_\_

Name of your High School's College Advisor(s): \_\_\_\_\_

List the colleges to which you have applied. Please indicate if you have already been accepted and which college you plan to attend.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Course of study you plan to pursue: Major \_\_\_\_\_ Minor \_\_\_\_\_

Possible career goal: \_\_\_\_\_

Please list six activities that you intend to pursue throughout your four years of college:

1 _____	4 _____
2 _____	5 _____
3 _____	6 _____

**COMMUNITY SERVICE HISTORY.** Please indicate the Dates you served, the Name of the Community Project, your Participation, and the Number of Hours spent.

DATES	NAME OF PROJECT	YOUR PARTICIPATION	HOURS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**EXTRA-CURRICULAR ACTIVITIES.** List your participation in activities outside of school curriculum, including Athletics, Student Government, Clubs, Organizations, Performance Arts, Committees, etc.

ORGANIZATION	DURATION	OFFICE HELD
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**AWARDS AND HONORS.** List awards you have received for academic accomplishments, sports or community service.

AWARD TITLE	ACCOMPLISHMENT
_____	_____
_____	_____
_____	_____
_____	_____

**PERSONAL STATEMENT.** Please write in essay form a statement about an activity, challenge, obstacle, event, or personal value that has some significance to you and how you have been transformed by it.

**FAMILY INFORMATION**

Mother's full name: \_\_\_\_\_ Is she living? \_\_\_\_\_

Home address (if different from yours): \_\_\_\_\_  
\_\_\_\_\_

Name of Business or Organization: \_\_\_\_\_ Occupation: \_\_\_\_\_

Name of College (if any): \_\_\_\_\_

Degree: \_\_\_\_\_ Year: \_\_\_\_\_

Name of Professional or Graduate school (if any): \_\_\_\_\_

Degree: \_\_\_\_\_ Year: \_\_\_\_\_

Father's full name: \_\_\_\_\_ Is he living? \_\_\_\_\_

Home address (if different from yours): \_\_\_\_\_  
\_\_\_\_\_

Name of Business or Organization: \_\_\_\_\_ Occupation: \_\_\_\_\_

Name of College (if any): \_\_\_\_\_

Degree: \_\_\_\_\_ Year: \_\_\_\_\_

Name of Professional or Graduate school (if any): \_\_\_\_\_

Degree: \_\_\_\_\_ Year: \_\_\_\_\_

If not with both parents, with whom do you make your permanent home? \_\_\_\_\_

If parents are divorced, is either or both remarried? Mom \_\_\_\_\_ (Y/N) Dad \_\_\_\_\_ (Y/N)

Please give the names and ages of your brothers and sisters:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Member(s) of St. Catherine of Siena parish since \_\_\_\_\_ (year).

To the best of my knowledge and belief, the information provided herein is complete, accurate and true. I understand that any false, inaccurate, or misleading information will result in the forfeiture of any scholarship or award that I may receive.

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