

Scholarship Application

Please complete and mail application to: P.O. BOX 811 Great River, NY 11739

		Applicant I	nforma	tion				
Full Name:						Date:		
	Last	First			M.I.			
Address:								
	Street Address						Apartment/Ui	nit #
	City				State		ZIP Code	
Phone:		E	mail					
Are you a ci	tizen of the United States	YES NO ? I	f no, auth	norized	to attend scho	ool in the	YE S U.S.?	NO
		Educ	ation					
High Schoo	l:	Address :						
From:	To:	Did you graduate?	YES	NO	Diploma :			
Colleg e:		Address :						
From:	To:	Did you graduate?	YES	NO	Degree:			
Other:		Address :						

From:	To:	YES NO Did you graduate? Degree:					
		References					
Please list two	professional/per	sonal references.					
Full Name:		Relationship:					
Phone:	hone: Email:						
Full Name:		Relationship:					
Phone:		Email:					
School Involvement							
Please list any	/ club/organizatio	ns:					
Please list any school sports:							
Please list any	/ club sports:						
What year/sea	asons were you o	n St Marys Track:					
		Intended College and Major					
Colleges of Interest:							
Intended Majo	or:_						
		Disclaimer and Signature					
I certify that m	y answers are tru	ue and complete to the best of my knowledge.					
	ion leads to empl result in my relea	oyment, I understand that false or misleading information in my application or ase.					
Signature:		Date:					

Essay

Please prepare an essay (200-500 words) explaining what ideals, lessons, or teachings have stuck with you from your time in our program. How do you apply them in your life today and/or how do you plan to apply them in your future? (Feel free to use this space or attach a separate sheet)