

**ST. JOHN'S CHAPEL
1213 HUDSON ROAD
CAMBRIDGE, MD 21613**

APPLICATION FOR SCHOLARSHIP

This award will be presented following the successful completion of the first semester. It is the responsibility of the recipient to provide the chairman of this committee with a copy of his/her first semester grades. To apply for this scholarship the student shall have a cumulative GPA of 3.0.

Name _____ D.O.B. _____
Phone # _____ Email _____
Address _____
City _____ State _____ Zip _____
High School _____
Father's Name _____ Occupation _____
Address _____ Phone# _____
Mother's Name _____ Occupation _____
Address _____ Phone# _____
Approximate Household Income _____
List Other Dependent Children Living At Home _____

Explain Any Unusual Financial Obligations (Family) _____

Name and Address of College you plan to attend _____

Accepted: Yes ___ No ___ Major _____

Estimated Cost per Year: Tuition _____ Books _____

List Other Means of Financial Assistance You Have Applied For. Please Indicate if it Has Been Awarded and the Amount _____

Completed FAFSA Application: Yes ___ No ___ EFC _____

***Please include a letter about yourself and your career choice.**

***Have the Guidance Counselor Approve Your Application and Include a Copy of Your High School Grades.**

***Return the completed application to the Guidance Office by April 27, 2018.**