#### St. Francis Xavier Alumnae Association

# **Application for 2021 Catholic High School Scholarship**

## www.stxavieralumnae.org

#### **Selection Criteria**

To be eligible for a St. Francis Xavier Alumnae Scholarship, each applicant must be a student who is currently attending a Catholic high school or who has been accepted and is entering a Catholic high school. The individual must be a child, grandchild, niece, nephew and/or foster child of a graduate of St. Xavier Academy (formerly located in Providence, Rhode Island or in Coventry, Rhode Island). The graduate sponsoring this applicant must be a current dues-paying member of the St. Francis Xavier Alumnae Association.

Applicants should be nominated by only ONE sponsor. (Having multiple sponsors does not increase the applicant's chance for an award.) Students are eligible even if they have received aid from another source or had received previous support from this scholarship fund.

#### Applications must be completed in full in order to be considered for these awards.

The scholarships are based on merit and student need.

The number and amount of the scholarships will be determined annually.

The scholarship committee may ask the applicant's school to provide additional information.

The contents of this application will be used only for the purpose of this scholarship.

Deadline Date: Completed applications must be received no later than July 1, 2021.

## St. Francis Xavier Alumnae Association Scholarship Application

To be Completed by Spor	nsor:	Please Print Clearly			
Date Submitted					
I am currently a du	es-paying memb	per of the St. Francis Xa	vier Alumnae Associatio	n.	
Name of Sponsor			Graduation Year from th	e Academy	_
Address		City	State	Zip	
Contact Telephone numb	er		Email		
Name of Student				<del></del>	
Relationship to Applican	t:				
The Student is my:	Child	Grandchild	Niece or Nephew	Foster Child	

#### To be completed by Parent(s)/Guardian(s)

#### **Please Print Clearly**

Name of Student	Grade in 2021-22				
Student Street Address		_State	Zip_		
Name(s) of Parent(s)/Guardian(s)					
Address of Parent(s)/Guardians(s) if different from a	bove:				
Family Telephone Number	_ Parent/Guardian(s) Email				
Name of Catholic High School Attended					
Address	City		State	Zip	
Website	Name of Principal				

All of the following items must be submitted in order to be considered for a scholarship award:

- Financial Statement in this application as well as a copy of IRS Form 1040 2020 pages 1 & 2 (or equivalent) for household where student lives (and for person paying tuition - if these two are different)
- A copy of the student's latest grades (Do not include copies of awards, certificates etc.)
- An essay written by the student in his or her own voice and style on one of the topics described below

## **Topic for Student Essay:**

If you are in <u>Grade 9 or just entering this school</u>, tell us about yourself and describe how you expect this Catholic high school experience school to help you to make decisions about your future.

If you are an <u>upperclassman</u>, tell us about yourself and describe how your Catholic high school experience has helped you to make decisions about your future.

<sup>\*(</sup>A parent statement may be submitted to explain any special circumstances that should be considered.)

#### **Financial Statement**

I (we) certify that the information on this application is true and complete to the best of my (our) knowledge. I (we) shall provide on request, any information required to verify information given in this document. I (we) realize that if I (we) do not comply with requests for information, the student will no longer be eligible for a scholarship.

Occupation of each parent/guardian				
Check one of the following indicating who is responsible for Tuition:				
2 Parents in same householdParent and Step-parent in same householdSingle Parent				
Describe circumstances different from above				
Name(s) and occupation(s) of persons who pay tuition				
Has the family applied to the school (or other source) for Financial Aid?YesNo  If Yes, please describe				
Please attach IRS forms 1040 or other that show annual income:				
A. For household in which the student lives				
AND (if different from the household in which student lives)				

B. For person(s) who pay the tuition

# For the Household from which the tuition for the applicant is paid, please list all dependents (including the applicant) whose tuitions are paid. Please print clearly.

## **Elementary and Middle School Students**

	Relationship			Full	Financial Aid	<b>Total Tuition</b>
Student Name	In Family	Grade	School	Tuition	Awarded **	Paid (annually)
		2022		2022	for 2022 *	by Household

## **High School Students**

	Relationship			Full	Financial Aid	Total Tuition
Student Name	In Family	Grade	School	Tuition	Awarded	Paid (annually)
		2022		2022	for 2022 *	by Household

<sup>\*</sup>If information is not known for 2022, please give details for 2021

Other educational Expenses: Please describe payments for which <u>family</u> is responsible. Use another sheet if needed.

## St. Francis Xavier Alumnae Scholarship Application

# **Certification and Signatures**

I (we) certify that the information on this application is true and complete to the best of my (our) knowledge. I (we) shall provide on request, any information required to verify information given in this document. I (we) realize that if I (we) do not comply with requests for information, the student will no longer be eligible for a scholarship.

I (we) give permission to the school to release transcripts and provide recommendations concerning merit and financial need to the St. Francis Xavier Alumnae Scholarship committee for the sole purpose of this application. All information in this application will remain confidential.

<u>Signatures:</u>	
Parent (Legal Guardian) of the applicant	
Applicant (Student)	
Sponsor (Dues-paying Member of SXA Alumnae)	
Date of Submission	

Please mail this completed application to the following address.

**Deadline Date is July 1, 2021** 

Scholarship Committee
St. Francis Xavier Alumnae Association
P.O. Box 20452
Cranston, RI 02920