

2018 FR. JOHN HOWARD MEMORIAL SCHOLARSHIP

This application is an invitation for you to apply for a \$1,000 scholarship, being awarded by the Holy Spirit Men's Club, on behalf of Holy Spirit Catholic Church, located in Highland, Michigan. Several scholarships will be awarded. In order to be eligible for a scholarship, you will need to meet the following criteria:

- Full time college student (undergraduate, graduate, and certified and accredited vocational or trade) student with school starting this fall semester.
- Your family is a registered member of Holy Spirit Catholic Church for at least one year.
- You must be a follower in the principles and teachings of the Catholic Faith.
- Previously awarded scholarship winners can reapply.

Please complete the attached application by filling in the requested information. **All information will be kept confidential.** Young students shall complete this application with parent or guardian assistance. A one-page letter of introduction is recommended and should be attached to the application. Please type or print all information including date and signatures. Submit your completed application to Mrs. Kay Young at Church of the Holy Spirit, C/O 2018 Fr. John Howard Memorial Scholarship, 3700 N. Harvey Lake Rd., Highland MI 48356.

Items to be included are as followings:

1. **A letter of introduction.**
2. **A picture of yourself.**
3. **The fully completed application.**
4. **A copy of your transcript.**
5. **Letter(s) of recommendation.**

The last day for accepting applications is **Thursday April 19, 2018 at 4:00 P.M., delivered to Kay Young in the Church office.** Kindly note that we will not accept late applications due to lost, delayed or misdirected mail, emails or deliveries so plan accordingly.

The committee will interview all applicants. We will make every effort to accommodate your requested interview date. All applicants will be notified by mail or email as to your status in the selection process. Scholarship checks will be issued upon receipt of a copy of an acceptance letter and verification of enrollment to the institution you plan on attending.

With God's Blessing,

The Church of the Holy Spirit Men's Club
Fr. John Howard Memorial Scholarship Committee

Questions/Concerns/Special Circumstances Contact:

Brandan Luther – 2018 Chairman, (248) 496-0985 (call/text) 9 AM – 10 PM

Email: brandanluther@yahoo.com

Envelope Number _____

Printed Applicants Name: _____

2018 FR. JOHN HOWARD MEMORIAL SCHOLARSHIP

SCHOLARSHIP APPLICATION

Applicant's Name (last, first): _____

Address (complete mailing): _____

Primary phone: _____ Cell phone: _____

Email address: _____

Date of Birth: __/__/____ Name of High School: _____

Complete Address: _____

Date of Graduation from High School: __/__/____

Indicate which educational program you plan to pursue:

- () Community College or Certified Accredited Technical/Vocational School (2yr)
- () College or University (4yr)
- () Number of credit hours per semester

Preferred interview date: May 5th or alternate date May 12th (if needed). Please circle one.

FAMILY INFORMATION

Father's/Guardian's full name: _____

Occupation: _____

Mother's/Guardian's full name: _____

Occupation: _____

Please list the names and ages of all applicant's brother and sisters living at home, or in college and being claimed as a dependent on parents/guardians tax return.

<u>NAME</u>	<u>AGE</u>
_____	_____
_____	_____

() Mark an (X) to indicate additional information on the back of this page.

Approximately (family – household) income for the year ending December 31, 2017

- () Less than \$50,000
- () \$50,000 to \$100,000
- () above \$100,000

OTHER SCHOLARSHIPS

List other scholarships you have applied for, or have been awarded.

<u>NAME OF SCHOLARSHIP</u>	<u>DATE OF AWARD</u>	<u>AMOUNT OF AWARD</u>
_____	_____	\$ _____
_____	_____	\$ _____

() Mark an (X) to indicate additional information on the back of this page.

List the colleges/certified accredited vocational or trade schools where you have APPLIED and been ACCEPTED to: (Please indicate if your application is still pending.)

() Mark an (X) to indicate additional information on the back of this page.

Which college or vocational school do you plan to attend during the **2018-2019** academic year?

PERSONAL EXPENSES

Estimate what it will cost (to the nearest \$100.00) you to attend this college/vocational school for the **2018-2019** academic year?

Tuition and Fee: (\$) _____

Room and Board (\$) _____

Books and Supplies (\$) _____

Travel Expenses (\$) _____

Personal Expenses (\$) _____

Total Expenses (\$) _____

STUDENT LOANS

Do you currently have any outstanding student loans? _____. If so, what do you owe?

\$ _____.

Will you be applying for a loan for this upcoming academic year? _____. If so, how much?

\$ _____.

Envelope Number _____

Printed Applicants Name: _____

FINANCIAL AGREEMENT WITH PARENTS

What agreement do you have with parents in regards to payment of educational expenses?
(Examples: Parents pay all or Parents pay % or Parents pay tuition and books, student pays room and board or student pays all costs.)

JOB EXPERIENCE

List your job experience from the present back to high school or attach Resume.

<u>EMPLOYER</u>	<u>TYPE OF WORK</u>	<u>DATES EMPLOYED</u>	<u>HR. WAGE/ HRS.WORKED</u>
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() Mark an (X) to indicate additional information on the back of this page.

What was your personal income last year? Please round off to the nearest \$1,000.00
\$_____.

SPECIAL CIRCUMSTANCE

Describe any unusual events, hardships, special needs need for financial aid (including any special family circumstances such as unemployment, illness, death, disability, etc., or obstacles you may have had to overcome in education or family life that would aid the committee in making its decisions for the scholarship. How much are the parents contributing for education expenses for all of their children? Use additional paper to elaborate if needed.

PRO LIFE VS PRO CHOICE

As a Catholic practicing the principles of our faith, please provide your views on pro-life vs. pro-abortion. Use additional paper to elaborate if needed.

GOALS AND CAREER PLANS

Please state your goals and career plans. Use additional paper to elaborate if needed.

ACTIVITIES

How long have you been a registered member of The Church of the Holy Spirit?
(Years) _____

Please list all groups, community service, activities/clubs/sports, your parents/guardians and you have participated in the church and schools.

WHO	GROUP	COMMITTEE/POSITION	LENGTH/TIMES

() [Mark an \(X\) to indicate additional information on the back of this page.](#)

The main fundraiser for funding the scholarships is the Holy Spirit Men’s Club’s Summer Raffle & Family Picnic, held the last Sunday in July every year on the Church grounds.
Have you ever volunteered to help with/at the picnic? _____. When? _____ What did you volunteer to do? _____

By submitting this application, I declare that all of the information given in this application is true and accurate to the best of my knowledge.

I UNDERSTAND THAT IF I AM AWARDED THIS SCHOLARSHIP, I MUST PRESENT MY ACCEPTANCE LETTER & COLLEGE OR STUDENT ID NUMBER TO THE CHURCH OF THE HOLY SPIRIT C/O HOLY SPIRIT MEN’S CLUB SCHOLARSHIP COMMITTEE AND KEEP IT APPRAISED OF MY PROGRESS DURING THE ACADEMIC YEAR COVERED BY SUCH AWARD.

____/____/2018
Date _____
Applicants Signature

____/____/2018
Date _____
Parent/Guardian Signature

____/____/2018
Date _____
Parent/Guardian Signature