

Sacred Heart Church Scholarship Application

Personal Information

Legal Name		Date of Birth	
email address			Telephone Numbers(s)
Address (Number Street)			
City or Town	State	Zip Code	

Please attach a letter about your current educational and personal goals. Include any information you believe would help us evaluate your application.

References

Please submit three (3) letters of recommendation with this application. The letters can be included with your application, faxed to (313) 831-8603, or mailed to Sacred Heart Church, 1000 Eliot, Detroit, MI 48207. You should verify all three letters arrive before the application deadline.

Past Academic Information

Include information about the last three years. Include earlier information if it will help us evaluate your application. Attach a list if you need more room.

School Name	Address	Dates Attended	Grade Point Average

Current Academic Information

Please include proof of acceptance or current enrollment at this institution, such as a copy of your student identification card or a copy of your letter of acceptance. If you are currently enrolled, send a transcript of your grades. If you are just starting at this school, send a transcript from the last school you attended. For example, if you are a college freshman, please send a high school transcript.

Name of College, University or Vocational School where you plan to use the scholarship			
Address (Number Street)			Field of Study (Major)
City or Town	State	Zip Code	Student Status (e.g. freshman)

Community Service

Contributions to your community can include extra-curricular activities or volunteer work. If you need more room, please attach a list of your additional services to the community.

Name of activity or organization	Dates

Applications, including all supporting documentation, for the scholarships must be returned to Father Thomas by 30 June. If you have any questions about how to fill out this application, please contact Frieda Thorne at (313) 863-4687 or Bonnie Walker at (248) 543-2698. You may email Bonnie Walker at bjwalk@msn.com.

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Immediate Family Information

Please indicate the head of the household with an asterisk '*'. Family information here is similar to the way it is reported on a W-4. If you are financially independent, you should report only your income. If you are married, have children, or if you are a dependent child you should include income information for your household. If you need more room, please attach the information.

Family Address (Number Street)			Family Size
City or Town	State	Zip Code	Home Telephone Number
Family Member Names	Relation to applicant		Age

Financial Information

Please furnish official substantiation for the income information provided, e.g. copies of a W-2, Social Security statement, Financial Aid applications. Please send ***copies*** of your important documents.

Applicant's Employer			
Employer's Address (Number Street)			
City or Town		State	Zip Code
Names of Other Grants, Scholarships or Loans Awarded to Applicant			Amount
Annual Incomes in the Past Year			
Head of Household		Applicant	Total Household

TO BE FAIR, ONLY COMPLETE APPLICATIONS CAN BE CONSIDERED. PLEASE CHECK THAT YOU ENCLOSED

Three letters of recommendation		Verification of all income information (e.g. a copy of your W-2)	
A letter about your personal goals		Fully completed application form	Proof of enrollment or acceptance at the school you will attend. Transcripts

Signature

Today's Date

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