

**CATHOLIC DAUGHTERS OF THE AMERICAS**

**COURT ST. MARY # 468**

**SCHOLARSHIP APPLICATION**

A scholarship will be awarded to a student whose Mother or Grandmother is a member of Court St. Mary # 468 C.D.A. The student must attend School the following Fall.

NAME OF SPONSORING CATHOLIC DAUGHTER: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Father's Name & Occupation:

\_\_\_\_\_  
\_\_\_\_\_

Mother's Name & Occupation:

\_\_\_\_\_  
\_\_\_\_\_

Names & Ages of Siblings Supported by parents:

_____	_____
_____	_____
_____	_____

A. Where do you plan to continue your education? \_\_\_\_\_

B. Have you applied? \_\_\_\_\_ Have you been accepted? \_\_\_\_\_ Waiting to hear? \_\_\_\_\_

C. GPA \_\_\_\_\_

D. What are your professional or occupational ambitions? Please include any information which could be helpful to the Scholarship Committee.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E. Use the back of this form to write a short request explaining your need for this scholarship.

**FINANCIAL INFORMATION**

F. Estimated Assets Budget:

Assistance from parents \$ \_\_\_\_\_

Scholarships & Grants \$ \_\_\_\_\_

Summer Income \$ \_\_\_\_\_

Other Source of Income \$ \_\_\_\_\_

**TOTAL Estimated Income** \$ \_\_\_\_\_

**TOTAL Estimated Expenses** \$ \_\_\_\_\_

G. Estimated Expenses:

Tuition \$ \_\_\_\_\_

Room \$ \_\_\_\_\_

Board \$ \_\_\_\_\_

Other Expenses \$ \_\_\_\_\_