

January 6, 2017

The Southern Deanery of the Council of Catholic Women is offering a \$500 scholarship to an active Catholic student who will be a graduate from any Brevard High School, Catholic, public or private, at the end of the 2017 school year. This is the twelfth year that we have offered this scholarship. ELIGIBILITY CRITERIA: Must be a resident of Brevard County and must be a practicing Catholic in a Brevard County Parish.

- Must complete a double spaced paragraph of 300 words or less, as to the reason the student plans to attend college and the student's goal upon graduation from college.
- 2. Must provide a copy of the student's official high school transcript.
- Must include a letter of recommendation from a teacher in whose class the student is currently enrolled or a coach or sponsor of a sport or activity in which the student is currently participating or the student's high school counselor (name and phone number for counselor for verification, if needed.)
- 4. Complete the attached application, pages 2 and 3 of activities and essay. Return these along with the letter of recommendation and the high school transcript by U.S. mail by the DUE DATE OF MARCH 15, 2017.

MATERIAL WILL NOT BE ACCEPTED IF POSTMARKED AFTER THE MARCH 15 DATE.

RETURN TO: Roberta Musco 1108 Titus Avenue Titusville, FL 32796

Upon verification of enrollment at a college, a check for \$500 will be issued to the winning student.

Name		<del></del>	
	Last	First	Middle
Address			
City		, FL (zip)	Phone
Date of Birth	n//Chu	rch	
Pastor's veri	fication of <u>active particin</u>	pation and attenda	nce at church by his signature below.
PASTOR'S SI	GNATURE		
	rent/Parents/Guardian:		ligh School Counselor and Phone #:
	ege(s) or community colle		have applied or been accepted.
		applied	been accepted
		applied	been accepted
		applied	l been accepted
also list scho	ool honors and activities. ced,) your reason for goin	On a separate she	nctivities in which you have been active; eet of paper, write in 300 words or less field of study and your goal upon
Have you in	cluded the following?		
	Application		Page 2 and 3 Activities
	Pastor's Signature		Your 300 word essay
	Transcript		Letter of recommendation from current
			teacher, sponsor, coach or counselor

If more space is need	led, add an additional	sheet of paper.	Page 2 Scholarship
		Name	<u> </u>
CHURCH SERVICE	: (include all since Firs	t Holy Communion)	
Activity	Grade Level	Hours (per month)	<b>Brief Description</b>
		(Or dates of service if	
		short term activity)	
		TOT	AL HOURS.
			ALBUNIES.
			AL HOURS:
	•	gust 1, 2014 to Decembe	er 31, 2016 – beginning
	•		er 31, 2016 – beginning
	•	gust 1, 2014 to Decembe	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to Decembe first semester of your 1	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to Decembe first semester of your 1 Hours (per month)	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to December first semester of your 1  Hours (per month)  (Or date of service if)	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to December first semester of your 1  Hours (per month)  (Or date of service if)	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to December first semester of your 1  Hours (per month)  (Or date of service if)	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to December first semester of your 1  Hours (per month)  (Or date of service if)	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to December first semester of your 1  Hours (per month)  (Or date of service if)	er 31, 2016 – beginning 2 <sup>th</sup> grade year)
of your 10 <sup>th</sup> grade year	through the end of the	gust 1, 2014 to December first semester of your 1  Hours (per month)  (Or date of service if)	er 31, 2016 – beginning 2 <sup>th</sup> grade year)

TOTAL HOURS: \_\_\_\_\_

If more space is needed, add	an additional sheet of paper	Page 3 Scholarship				
		Name				
SCHOOL ACADEMIC HONORS:						
SCHOOL ACTIVITIES: (Include art, music, drama, and sports)						
		Community				
Club or Activity	Grade Level	Comments				