

# **MOUNT ASSISI ACADEMY**

## **SCHOLARSHIP APPLICATION for Incoming Freshmen and Upper Class Students**

Thanks to contributions by the School Sisters of St. Francis and the generous contributions of parents, alumnae and friends, Mount Assisi Academy is able to offer various scholarships each year.

### **Academic Excellence**

To be considered for an *Academic Excellence* scholarship, an applicant must

1. take the Mount Assisi Academy placement exam in January
2. register as a student at Mount Assisi and either
  - 3a. submit the completed application form to the Mount Assisi Academy Scholarship Committee, 13860 Main Street, Lemont, IL 60439 by April 30, 2010 or
  - 3b. complete the application form and give it to your Principal, asking that a letter of recommendation be written for you. The principal is asked that the letter of recommendation and your completed application be sent to Mount Assisi Academy Scholarship Committee, 13860 Main Street, Lemont, IL 60439 by April 30, 2010.

### **Financial Need Assistance**

To be considered for *financial need assistance*, an applicant must

1. complete steps 1, 2, and 3a above by May 30, 2010 and
2. complete the FACTS Grant & Aid Assessment that is sent directly to FACTS Tuition Management Program by May 30, 2010.

All forms are available at freshmen/new student orientation.

All information is to be typed or printed and to be completed in full by the applicant. All information will be held strictly confidential.

**N.B.** All applications will be evaluated, reviewed and determined by the Mount Assisi Academy Scholarship Committee. Notification to recipients of scholarship awards or financial assistance will be made by June 30, 2010.

.....

Scholarship for which I am applying is \_\_\_\_\_  
(See separate sheet for list of scholarships available)

Student's Name \_\_\_\_\_  
*First Middle Last*

Address \_\_\_\_\_  
*Number and street City Zip*

Telephone no. \_\_\_\_\_ Cell phone no. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Religion \_\_\_\_\_ Parish \_\_\_\_\_

School entering from \_\_\_\_\_

Father's Name \_\_\_\_\_  
*First Middle Last*

\_\_\_\_\_  
*Father's occupation Employer Work phone*

Mother's Name \_\_\_\_\_  
*First Maiden Last*

\_\_\_\_\_  
*Mother's occupation Employer Work phone*

\_\_\_\_ Yes, I am a relative of a Mount Assisi alumna.

\_\_\_\_\_  
*Name of alumna (maiden name) year of graduation relationship*

\_\_\_\_\_  
*Name of alumna (maiden name) year of graduation relationship*

\_\_\_\_\_  
*Name of alumna (maiden name) year of graduation relationship*

QUESTIONNAIRE (to be completed by student)

1. What are your academic goals?
2. What extracurricular activities do you enjoy?
3. List any honors/awards you have received in the last three years.
4. Why do you feel you deserve to be awarded this scholarship?
5. Describe a situation in which you exercised leadership and explain why you believe you were a leader.

6. Is there any other information the scholarship committee should know about you that has not been asked for, that would distinguish you from the other candidates?

---

Signature of Student

---

Signature of at least one parent

Please check what applies to you:

Yes, I am also applying for a financial need scholarship and have completed and mailed the FACTS Grant & Aid Assessment.

Yes, I would like to apply for the Mount Assisi Academy alumnae scholarship also.

No, I am not applying for a financial need scholarship.