

PATRICIA I. SOVERS MEMORIAL SCHOLARSHIP AWARD APPLICATION

(applicant must be an active senior class member of St. Mary's Religious Education Program, Solon, Iowa)

SEND APPLICATION POSTMARKED BY APRIL 15 TO: **Doug Thompson**
3931 Mehaffey Lane, N.E.
Solon, IA 52333
(319/624-3664)

Name: _____ **Phone:** _____ **Date:** _____

1. Involvement in the Parish (list number of years):

- ___ Youth Choir
- ___ Altar Server
- ___ Lector
- ___ Usher
- ___ Faith Formation Commission (active)
- ___ Church Cleaning
- ___ TEC
- ___ Youth Rally
- ___ Retreats (circle one or both--participant/leader)
- ___ Catholics In Action
- ___ Steubenville Conference
- ___ Catholic Heart Work Camp
- ___ Vacation Bible School
- ___ Youth Group
- ___ Other _____

2. Community Service Involvement--local and/or diocesan (e.g., visiting and/or assisting the elderly, collecting food, scouting, muscular dystrophy drives, earth day involvement, etc.)

3. Public School Activities (e.g., chorus, sports, Student Council, drama, any other extracurricular activities, etc.)

4. List any achievements or honors you have earned during your high school years.

5. **Grade Point Average** _____

6. **ACT Score** _____

7. **Class Rank** _____

8. **Have you been accepted or applied to a two- or four-year college?**

___Yes ___No If yes, please name.

9. **Reason this scholarship is important to you.**

10. **List your work experience, or places of employment, with most recent first.**

11. **Do you feel it is important to continue your religious education beyond high school?**

12. **Will you be contributing monetarily to your college education?**

___Yes ___No

13. "How My Faith Will Help Me Through Life" (Single page, Double spaced, No smaller than 12 font)

Reference Name: _____ **Phone #:** _____

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Please retain a copy of the completed questionnaire for your records. If necessary, an interview will be scheduled.