

CHARLES PASSE ENDOWMENT FUND
APPLICATION FOR SCHOLARSHIP

Date: _____

Applicant Name: _____

First

Middle

Last

Applicant Address: _____

Street

City, State, Zip Code

Applicant Date of Birth: _____

Phone: _____

Email: _____

Are you currently attending school? _____

Yes

No

If yes, where: _____

Name of School

Phone

Are you currently employed? _____

Yes

No

If yes, where: _____

Name of Employer

Phone

Name and location of school you are interested in attending:

Tuition: \$ _____

If needed, candidates will be invited to interview.

Please attach the following:

- A typed essay of 250 words or less as to why you wish to be considered for a scholarship.
- A letter of recommendation from your pastor or parish representative.
- Two letters of recommendation from past or present employers or teachers.

Mail to or drop off at the Parish Office:

Christ the King Catholic Parish
Charles Passe Scholarship Program
1551 East Dana Avenue | Mesa, Arizona 85204

As a stewardship community, we hope that scholarship recipients will return a portion of their talents to the parish in future needs and endeavors.

FOR OFFICE USE ONLY:

RECEIVED: Date: _____ Time: _____ By: _____ (Initials or Name)

PASSE SCHOLARSHIP FUND APPLICATION FORM

Applicant's Name:

As you would like it publicized/announced

Father's Name:

Mother's Name:

If Applicant is under 18 years of age

Current Parish: Christ the King Catholic Parish

How long:

Current School:

How long:

Previous School(s):

Current Grade: _____

Cumulative GPA (please circle): 2.0 2.5 3.0 3.5 4.0+
Through December of current school year

Class Start Date: _____

Will attend as a full-time student

Will attend as part-time student

School/College – 1st Choice:

Address:

Tuition Office Phone:

Scholarship Office Phone:

Tuition for 1 year: \$

Estimated Cost of Books: \$

Declared Major or Program:

Application Date:

Date of Acceptance:

School ID#:

School/College – 2nd Choice:

Address:

Tuition Office Phone:

Scholarship Office Phone:

Tuition for 1 year: \$

Estimated Cost of Books: \$

Declared Major or Program:

Application Date:

Date of Acceptance:

School ID#:

Attachments:

Essay Attached

Pastor or Parish Representative Letter of Recommendation

2 Letters of Recommendation: Enclosed **or** Being sent separately from:
and

Applicant Signature:

Date:

Parent Signature:

Date:

If Applicant is under 18 years of age