



NEEDS SCHOLARSHIP APPLICATION

The mission of the tuition Needs Scholarship is to recognize students for their outstanding performance in education and character and to support the continuance of their education. The St. Peter Scholarship Program was established in 2021.

NEEDS SCHOLARSHIP AWARDS

The St. Peter Scholarship Program awards scholarships on the basis of a comprehensive process. Areas that are reviewed by the St. Peter Scholarship Program Committee include, but are not limited to the following, *academic performance, leadership potential, good character, community service, volunteer hours and references*. **Financial needs are the primary focus of this award.**

CRITERIA

1. Applicants must complete and submit an Scholarship Application by **April 15, 2024 (no exceptions)**.
2. Students must be enrolled at St. Peter Catholic School or entering a Catholic high school to apply.
3. Refer to the application process for a list of the supporting documents needed (i.e., reference forms, evidence of GPA, etc.). Incomplete applications will not be considered.
4. If any question does not apply to you in this application please put N/A in the space.
5. Print legibly. Illegible applications will be returned to you.

You will be notified by phone or e-mail on May 13, 2024 regarding the status of your application.

If you have any questions about the application, contact StPeterscholarship@petertherock.org or call 719-481-1855.

Scholarship funds are paid directly to the school. Should the student leave prior to finishing the school year, the funds remain with the school.

SCHOLARSHIP APPLICANTS MUST PROVIDE:

- Completed application form.
- Official school transcript in a sealed envelope from St. Peter Catholic School.
- Two letters of recommendation.
- Teacher Evaluation form – *this form will be provided from the school office to the teacher for completion and submitted directly to the Scholarship Committee.*
- A letter of acceptance from St. Peter Catholic School or a Catholic high school.

Deadline for the application is **April 15, 2024**.

Please mail or submit application via email to:

St. Peter Catholic School

ATTN: St. Peter Scholarship Program Committee

124 1st Street

Monument, CO 80132

Email: StPetersScholarship@petertherock.org



Tuition Needs Application 2024-2025

Please **print** your answers below. A separate sheet may be used if needed. If application is illegible it will be returned to you.

1	Student's Last Name: _____	Student's First Name: _____
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2	Students Mailing Address: Street: _____ City: _____ State: _____ ZIP: _____
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3	Parent or Guardian Telephone Number: () _____ () _____ Home Home Cell Cell Parent or Guardian Email address: _____
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4	Current School: _____ Home Parish: _____	Current Grade: _____
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5	I will be attending the following school in the <i>Fall of 2024</i> : _____ Address: _____ Phone: _____
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6	Grade Point Average (GPA) _____ (On a 4.0 scale)
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7.	Name & address of parent(s) or legal guardian(s), If different from Student address Name _____ Street _____ City: _____ State: _____ ZIP: _____
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8.	Have you Previously Received a St. Peter Scholarship Program Award? If so, please list the years:
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Please list the following information on a separate sheet if needed.

9	SCHOOL EXTRA-CURRICULAR ACTIVITIES: Please list school extra-curricular activities in which you have participated. Note leadership roles and dates.
10	REFERENCES/RECOMMENDATIONS: Please submit two letters of recommendation, not to include family. (Can include teachers, family friends and community leaders.)
11	ORGANIZATIONS: Please list community organizations such as service, volunteer and religious organizations in which you are now active or have previously been active. Note leadership roles and dates.
12	RECOGNITIONS: Please list important awards, recognitions and any academic goals received. Note organizations presenting honor and date.
13	GOALS: What are the short- and long- term goals for your life?
14	SERVICE: Please list any unpaid and voluntary exchange that has a learning benefit for you. This should show initiative, demonstrate perseverance and show development of skills such as collaboration, problem solving and decision making.
15	FINANCIAL NEED: Please list the need(s) for the St. Peter Scholarship Program. (To be completed by parent or guardian).

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me to the St. Peter Scholarship Program Committee is true and correct. I consent that my picture may be taken and used for any purpose deemed necessary to promote the St. Peter Scholarship Program.

Signature of scholarship applicant: _____ Date: _____