OUR LADY OF ANGELS CATHOLIC ASSOCIATION

Scholarship Application **Deadline April 12, 2025**

Please type or print:

NAME		TEL#	A STATE OF A
ADDRESS		CITY & ZIP	
What High School do you atter Class Rank Out of	nd?		
Class RankOut of	GPA	EMAIL	
Please list any other clubs/orga	inizations you belong	to:	
Please list any sports you partic	cipate in:		
Please list any sports you partice. Please list and describe any Co your four years in high school:	ommunity Service or \	Volunteer Work that	you have done during
Do you work? If so, v	where and how many	hours/week?	
Mother's Name and Employer: Father's Name and Employer:			
Do you have any siblings in co			
What College(s) have you appl			
Name of College	Tuition		Room/Board
Make a brief statement or sum objectives and long-term goals Please describe how and when	:		
achievement in school, work, e activities:	experience, or your pa	rticipation in school	
List three references who have (Exclude relatives)	known you and your	=	wo years.
Name	Address	Position	Telephone Number

Please provide one letter of recommendation from a guidance counselor or teacher and a transcript of your grades.

ESSAY:	Describe the importance of volunteering in your community.
	urn the completed scholarship application to:
7 Jesse St	y of Angels Scholarship Committee

Fairhaven, MA 02719