Zaruba Family Scholarship

Kearney Catholic Foundation Scholarship Application

ersonal Information:	
Name:	
Address:	
Email Address:	
Cell Phone:	
Parent/Guardian(s) Name(s):	
ACT Score: GPA:	Class Rank:out of
Post Secondary School Planning to attend:	
Major Course of Study:	
Scholarships already received:	

<u>Application Process</u>: Please return a printed copy of the completed scholarship application. Place all packet documents together with a paperclip in a large envelope. Each packet should include in this order:

- Cover page with a current picture of yourself.
- This signed scholarship application
- Activities resume with work history
- Personal Statement
- Unofficial Transcript
- Letter of Recommendation from outside KCHS and a non-family member.
- Write a paragraph on how you plan to finance your college education.
- Please attach a one page essay detailing how a teacher made an impact on you and your future plans to major in education or art?

Application Authorization:

• The signature below authorizes representatives of the Kearney Catholic High School Foundation or its agents to receive necessary scholastic transcripts and records necessary to successfully evaluate the applicant's merits for this scholarship.

Applicant's Signature:	Date:

Please return the three copies of the application and additional attachments by April 1 to:

Kearney Catholic High School Foundation 20 E. 21st Street Kearney, NE 68847