



St. Sebastian Parish Foundation Dayspring Opportunity Scholarship

MINORITY TUITION ASSISTANCE APPLICATION FOR ST. SEBASTIAN PARISH SCHOOL

Applicant's Name (PLEASE PRINT IN INK)

Address

City/State/Zip

Home Phone

E-Mail Address

- I understand that preference for this scholarship will be given to minority applicants.
As such I voluntarily disclose my status as _____.
- I understand that this scholarship is limited to minority students of St. Sebastian Parish School,
grades PreK- 7. (*students of grades K – 8 in the next school year*)
- Attached is my essay of introduction stating, in 500 words or less, how I have been, or will be,
involved in my parish and community and why a catholic education is a priority for myself and my family.
- Attached is a complete copy of my grades from the last and current school year.
- I understand that if I am a recipient of this scholarship, I will:
- Maintain a minimum 3.0 GPA
 - Actively participate in one or more school activity
 - Actively volunteer within my parish and/or school community

Applicant's Signature

Date