

St. Sebastian Parish FOUNDATION SINCE 1971

476 MULL AVENUE * AKRON, OHIO 44320-1299 * stsebastian.org/foundation

Christopher James Consilio Memorial Scholarship for 2025-2026

Scholarship Award Application for St. Vincent-St. Mary High School

Student's Name (please print in ink)		Grade in the fall of 2025	Grade in the fall of 2025	
Address				
City/State/Zip		Parent/Guardian Home Phone		
Parent/Guardian Email Address		Parent/Guardian Cell Phone		
☐ I understand that this scholar High School.	ship is to help cover a	portion of my freshman year tuition costs at S	it. Vincent-St. Mary	
☐ I am indicating St. Vincent-St.	Mary High School as	my first choice of high schools.		
I understand that this scholar freshman year, upon verification		ctly to St. Vincent-St. Mary High School the sum	nmer before my	
☐ Attached is my one page essa	y stating, in 500 word	ls or less: What friendship means to me.		
☐ I understand that late or inco	mplete applications w	vill not be considered.		
☐ I understand the deadline for	the application and e	essay is <mark>January 24, 2025</mark> .		
		s true, correct and complete to the best of our clude all parties responsible for paying tuition	_	
Student Signature	 Date			
Parent/Guardian Signature	 Date		 Date	

Please drop off the application and essay to the school office or mail to: St. Sebastian Parish Foundation, Attn: Consilio Scholarship, 476 Mull Ave., Akron, OH 44320

If applying for more than one scholarship, <u>please use a separate envelope for each application</u>, labeled clearly with the scholarship name.