

St. Sebastian Parish FOUNDATION SINCE 1971

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

The Elms Family Scholarship for 2025-2026

Scholarship Award Application for Our Lady of the Elms High School

Student's Name (please print in in	k)	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 scholarsHigh School.	ship is to help cover	a portion of my freshman year tuition costs at Our La	dy of the Elms
☐ I understand that this scholars	ship is limited to grad	duates of St. Sebastian Parish School.	
☐ I am indicating Our Lady of the	e Elms High School a	as my first choice of high schools.	
I understand that this scholars freshman year, upon verification of	•	ectly to Our Lady of the Elms School the summer befo	re my
		rds or less: How I have been involved in my parish ar dy of the Elms High School is important for me and r	-
Attached is a one-page letter of a contract of the contract	of recommendation f	from a teacher at St. Sebastian Parish School.	
☐ I give permission for the schoo	l to provide a copy o	of my student's grades from the current school year.	
I understand that late or incor	nplete applications	will not be considered.	
☐ I understand the deadline for	the application and	essay is <mark>January 24, 2025</mark> .	
		is true, correct and complete to the best of our known clude all parties responsible for paying tuition for the	_
Student Signature	Date		
 Parent/Guardian Signature		Parent/Guardian Signature Di	 ate

Please drop off the application and essay to the school office or mail to: St. Sebastian Parish Foundation, Attn: Elms Family 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.