



St. Sebastian Parish FOUNDATION SINCE 1971

476 MULL AVENUE \* AKRON, OHIO 44320-1299 \* [stsebastian.org/foundation](http://stsebastian.org/foundation)

## The Tom and Jeanne LaRose Family

### Memorial Scholarship for 2025-2026

Scholarship Application for St. Sebastian Parish School

Student's Name *(please print in ink)*

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 scholarship is limited to current students of St. Sebastian Parish School in grades Preschool-7 (who will be students in grades K-8 for 2025-2026) to help cover tuition costs to attend St. Sebastian Parish School.

☐ I understand that this scholarship is limited to students who are parishioners of St. Sebastian Parish and that financial need will be taken into consideration but is not a requirement.

☐ yes ☐ no: We submitted FACTS paperwork at the start of this school year indicating financial assistance is desired.

☐ yes ☐ no: I have siblings attending (or who have previously attended) St. Sebastian Parish School.

☐ Attached is my one-page essay of 300 words or less (handwritten or typed, length commensurate with the age of applicant). For younger students, parental help in translating the child's thoughts is acceptable.

#### What I like most about St. Sebastian Parish School

☐ I understand that any scholarship awarded will be paid directly to St. Sebastian Parish School and applied toward my tuition.

☐ I give permission for the school to provide a copy of my student's grades from the current school year.

☐ I understand that late or incomplete applications will not be considered.

☐ I understand the deadline for the application and essay is **January 24, 2025**.

☐ I / We declare that the information on this form is true, correct and complete to the best of our knowledge and that the parent/guardian signatures included here include all parties responsible for paying tuition for this student.

Student Signature

Date

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

***Please mail your application and essay to:***

***St. Sebastian Parish Foundation, Attn: LaRose Family Memorial Scholarship, 476 Mull Ave., Akron, OH 44320***

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