

St. Sebastian Parish FOUNDATION SINCE 1971

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

Dayspring Opportunity Scholarship for 2024-2025

Minority Tuition Assistance Application for St. Sebastian Parish School

Student's Name (please print in ink)		Grade in the fall of 2024
Address		
City/State/Zip		Parent/Guardian Home Phone
Parent/Guardian Email Address		Parent/Guardian Cell Phone
· · · · · · · · · · · · · · · · · · ·	his scholarship w	ill be given to minority applicants. As such I voluntarily disclose
•		dents of St. Sebastian Parish School currently in grades Pre-K to 7 cial need will be taken into consideration but is not a requirement.
☐ yes ☐ no: We submitted FACTS pa	aperwork at the s	tart of this school year indicating financial assistance is desired.
applicant. For younger students, pare	ental help in trans will be, involved	s: (Handwritten or typed, length commensurate with the age of slating the child's thoughts is acceptable.) in my parish and community and why a e and my family.
	-	of my student's grades from the current school year.
☐ I understand the funds will be dir	ectly applied to m	ny tuition account with St. Sebastian Parish School.
☐ I understand the deadline for the applications will not be considered.	application and e	essay is January 25, 2024 and that incomplete and/or late
 I understand that if I am a recipie Actively participate in one or Actively volunteer within my 	more school activ	vities
		s true, correct and complete to the best of our knowledge and clude all parties responsible for paying tuition for this student.
Student Signature	Date	
Parent/Guardian Signature	 Date	

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