

St. Sebastian Parish FOUNDATION SINCE 1971

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

John A. Trecaso Scholarship for 2024-2025

Scholarship Award Application for St. Vincent-St. Mary High 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
☐ I understand that this scholars	hip is to help cover a	portion of freshman year tuition at St. Vincent-St. Mary High School.
☐ I understand that this scholars be taken into consideration but is	•	duates of St. Sebastian Parish School and that financial need may
☐ I am indicating St. Vincent-St.	Mary High School as	my first choice of high schools.
☐ I understand that this scholars freshman year, upon verification of	•	ctly to St. Vincent-St. Mary High School the summer before my
, , ,		ds or less: How I have been involved in my parish and priority for my family and me.
☐ I give permission for the school	ol to provide a copy o	of my student's grades from the current school year.
☐ I understand that late or incor	mplete applications v	will not be considered.
•	•	STVM or who have graduated from STVM, please list them on a nship, graduation year, and maiden names, if applicable).
☐ I understand the deadline for	the application and ϵ	essay is <mark>January 25, 2024</mark> .
		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: Trecaso 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.