



SCHOLARSHIP APPLICATION FOR THE 2008-09 SCHOOL YEAR

Name of Student

First Name	Middle Name	Last Name
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Parents or Guardians of Student

Address of Student

Street	City	State	Zip Code
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Student Date of Birth

Student Grade Level in 2008-09

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Parish

Name	City
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School attending in 2008-09 school year

Name	City
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School attended last year (if not the same as above)

Name	City
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Household Income (Attach copy of 2007 PA-40 State Tax Return for all household members)

Amount

All information received is held in strictest confidence.

Name and Relationship of all Household Dependents including applicant

I (we) hereby agree that any scholarship award will be used exclusively for the payment of tuition and fees at the School designated above, and that the School is authorized to verify that the designated student is enrolled in said School and that the School's tuition has been paid. I (we) further agree to repay the Eastern Pennsylvania Scholarship Foundation any tuition amounts, paid for by scholarship grant from the Foundation, which are refunded to me (us) by the School by reason of the fact that the student is no longer enrolled in said School.

Signature(s) of Parents or Guardians

Date



Return this application with documentation to the school your child will attend.

