***2024 Application***

1. Personal Information

Name: Date of birth:

Home Street Address**:** Cell Phone: Email:

Mailing address:

Name of school now/previously attended:

Parent’s Name: Parent’s Address: Phone:

Parent’s email:

Name of institution which you plan to attend next year:Yr: Fr So Jr Sr (circle)

Have you been accepted? Expected graduation year:

Please state your educational/career goals:

Please list any other factors in support of this application which you may deem appropriate: (Honors or awards received, interests and activities, club memberships, civic activities, etc.)

II. Financial Information

Expected annual cost for: Name of school:

 Tuition and fees $

 Room and Board $

 Transportation $

Total expected annual costs: **$**

Expected amount of financial aid: $

personal and family contribution: **$**

Scholarships, grants, awards, work study, etc $

 Total personal/family, financial aid,other $

Please list any factors pertaining to your financial need of which you would like the committee to be aware

(e.g. other family members presently attending college, temporary unemployment of a parent, disability, changed circumstances, etc)

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return your completed typed application *(if using more than one page to reply – please put your last name at the top of each page)* with a copy of the most up-to-date transcript of your grades NOT LATER THAN **June 30, 2024** TO:

Email: subject line: 2024 CCA Scholarship your name at scholarships@cataumetca.org

or mail to: **CCA SCHOLARSHIP COMMITTEE**

**P.O. BOX 277**

**CATAUMET, MA 02534-0277**