

MARIAN CLUB OF NOTRE DAME SCHOLARSHIP APPLICATION

Application should be returned to: Notre Dame Jr/Sr High School Principal's Office

DEADLINE: APRIL 1st
NO APPLICATIONS WILL BE ACCEPTED BEYOND THIS DATE

NO A	PPLICATIONS WILL	ве ассерт	ED BEYOND TH	IIS DAT	E	
All information whic confidential.	h is reviewed by the M	Marian Club S	Selection Commi	ttee will	be considered	
Family/Guardian Name:			Date:			
List the names of all college:	children in the family	and the school	ol which each wi	ll attend	l, including	
STUDENT NAME		SCHOOL		GRADE IN 2021-2022		
List parent/guardian (Please including info	name, place of employ ormation for parent an	yment, job tit id/or step-par	le, approximate a ent with whom the	nnual ir he childi	ren live.)	
NAME		PLACE OF EMPLOYMENT		E	APPROX. ANNUAL INCOME	
Father:						
Stepfather:						
Mother:						
Stepmother:						



Describe your involvement at Notre Dame and include your involvement in community service:				
Describe why financial	l assistance is needed:			
	financial demands which exist:			
I am aware a FACTS 'Yes	Tuition Assistance Application Must be Filed for consideration.			
I certify that the inform	mation which is included above is accurate:			
(Date)	(Parent signature)			