



HOLY SPIRIT HIGH SCHOOL FATHERS CLUB

NEW ROAD, ABSECON, NEW JERSEY 08201

(609) 646-3000

Scholarship Application

Date of Application: _____

Name: _____ Phone: _____

Address: _____ City: _____

Father's Name: _____ Employer: _____

Occupation: _____

Mother's Name: _____ Employer: _____

Occupation: _____

Student Lives With: _____

Number of dependents in the family other than applicant: _____

Attending College: _____ Attending Holy Spirit High School: _____

Name and location of college or school you will be attending after graduation? _____

Intended field of study: _____

What financial aid have you received so far? _____

Indicate your present need for Financial Aid: _____

Extra curricular activities – Sports – community – other _____

Student Essay – Please include a 1-page essay on why you should get a scholarship.

Check one of the following to indicate the total (parents and students) family income:

___ \$0 to \$30,000

___ \$30,000 to \$ 60, 000

___ over \$60,000

Student Signature

Parent/Guardian Signature