

FATHER FRANCIS T. DIETZ, S.J. SCHOLARSHIP APPLICATION FORM  
Grades 7 & 8 (Gesu Junior High)  
Grades 9-12 (Area Catholic High Schools)

2009-2010

APPLICATION NUMBER \_\_\_\_\_ DATE OF APPLICATION \_\_\_\_\_

*Please note: Due to the increasing number of applications, ALL information requested on this form, including attachments, must be submitted before an application can be reviewed. Delays caused by returning this form to the applicant, or because not all information is given, might eliminate the applicant from further consideration.*

Please print or type all information requested on this form. Return the form and attachments to Fr. Snow at the Gesu Parish Office by **June 30, 2009**.

1) Applicant's Name \_\_\_\_\_ Phone \_\_\_\_\_

2) Applicant's Age \_\_\_\_\_ Applicant's Grade Level (2009-2010) \_\_\_\_\_

School Applicant Attends/Will Attend \_\_\_\_\_

3) Applicant's Address \_\_\_\_\_

Street

City

Zip Code

4) How long have you lived at the above address? \_\_\_\_\_ Years

5) Parents (if one or the other is deceased, please indicate) or Guardian(s):

Father \_\_\_\_\_

Mother \_\_\_\_\_

Single \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

Applicant lives with: \_\_\_\_\_

Guardian(s) (If applicable): \_\_\_\_\_

6) ATTACH COPIES OF THE FIRST TWO PAGES OF THE APPROPRIATE 1040 OR OTHER FEDERAL INCOME TAX FORM FOR PARENTS (OR GUARDIAN) AND THE APPLICANT FOR 2008. If any income or loss is reported for business income, also attach a copy of Schedule C. If any income or loss is reported for rents, royalties, trusts, etc., also attach a copy of Schedule E. **Note: Your application will NOT be reviewed without these attachments.** If no federal forms were filed for 2008, indicate that in the space below or on an attachment with the reason for not filing.

7) List ALL other children in the family besides the applicant:

Name	Age	Name of School (if attending)	Tuition & Fees
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8) Please list any scholarships or financial aid received for any of the other children in your family:

\_\_\_\_\_

\_\_\_\_\_

9) Employment:

a) **Applicant:** Job: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Employer's Name & Address: \_\_\_\_\_

Summer job or work during school year: \_\_\_\_\_

Earnings to date in 2009: \_\_\_\_\_

Projected earnings for Summer 2009: \_\_\_\_\_

b) Father or Guardian:

Occupation: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_

If Part Time, how many hours per week? \_\_\_\_\_

Employer's Name & Address: \_\_\_\_\_

c) Mother or Guardian:

Occupation: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_

If Part Time, how many hours per week? \_\_\_\_\_

Employer's Name & Address: \_\_\_\_\_

10) Has there been a substantial change in employment, income, or marital status during the last twelve months that has resulted in a significant change in the family's economic position from that shown on the attached income tax forms? If **YES**, please use the space below or an attachment to explain. Is there any substantial change that is expected to occur in the 2009-2010 school year?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11) Family Resources:

a) Monthly Mortgage Payment or Monthly Rent: \$ \_\_\_\_\_

b) Year Home Purchased: \_\_\_\_\_ Purchase Price: \$ \_\_\_\_\_

c) List Cars:

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Owned or Leased: \_\_\_\_\_ Annual Payment: \_\_\_\_\_

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Owned or Leased: \_\_\_\_\_ Annual Payment: \_\_\_\_\_

Year: \_\_\_\_\_ Model: \_\_\_\_\_ Owned or Leased: \_\_\_\_\_ Annual Payment: \_\_\_\_\_

d) Government Assistance (If on any type of government assistance, indicate the type(s) and the amount received):

Type(s): \_\_\_\_\_ \$ \_\_\_\_\_

e) Assistance from other sources (child support, alimony, parents, relatives, etc.). Indicate the type(s) and the annual amount received.

Type(s): \_\_\_\_\_ \$ \_\_\_\_\_

f) Personal family savings: \$ \_\_\_\_\_

g) Income from other than employment (interest, rent, dividends, etc.): \$ \_\_\_\_\_

12) Add any additional information relating to the necessity for you to apply for the Dietz Scholarship in the space below or in an attachment. (This might include extraordinary medical expenses, college tuition, changing family, or work status, etc.)

\_\_\_\_\_  
\_\_\_\_\_

13) In your opinion, how much do you need from the Dietz Fund to help meet your tuition obligations:

\$ \_\_\_\_\_

14) Please list all other scholarship assistance for which the applicant or the family has applied to defray the cost of the applicant's education.

Organization \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Organization \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Organization \_\_\_\_\_ Amount: \$ \_\_\_\_\_

15) **ATTACH** a copy of the applicant's **grade report** that covers the entire academic year that was just completed.

16) Please use the space below for any other information that you believe would help the Dietz Scholarship Committee in determining the applicant's need for assistance. Especially note any forms of service to the Church, School, or Gesu Community.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IN SIGNING THIS APPLICATION**, I certify that the above answers are true and correct to the best of my knowledge and belief.

Signed: Father \_\_\_\_\_

Mother \_\_\_\_\_

Guardian \_\_\_\_\_

Applicant \_\_\_\_\_

**Do not write in space below:**

Date application received: \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_ Decision: \_\_\_\_\_