



# St. Helen Women's Philoptochos

## SCHOLARSHIP APPLICATION

*Before completing, please read the Scholarship Application Instructions.  
Also, see page 2 of this application for documents needed to qualify for this scholarship. Print carefully.  
Fill in all lines using **N/A** where not applicable.*

### I. PERSONAL INFORMATION

1. Full name \_\_\_\_\_ Date of birth \_\_\_\_\_

2. Present address

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

E-Mail: \_\_\_\_\_

3. Permanent address

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

### II. EDUCATIONAL INFORMATION

**Academic Year You Are Applying For:** \_\_\_\_\_

1. What school will you attend? Holy Cross Seminary \_\_\_\_\_ Hellenic College \_\_\_\_\_

Expected graduation date? \_\_\_\_\_

2. What is your professional goal? \_\_\_\_\_

What is your course of study? \_\_\_\_\_

What is your expected academic level as of September, 2018? \_\_\_\_\_

What is your cumulative grade point average? \_\_\_\_\_

3. Residence plans: Dormitory \_\_\_\_\_ Home \_\_\_\_\_ Other (specify) \_\_\_\_\_

### III. OCCUPATIONAL INFORMATION

1. In what related fields or activities have you been involved: for recreation, as a volunteer, community work or an employee? (Please highlight any volunteer activities.)

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*As part of your application, please submit the following documents:*

- 1) **OFFICIAL LETTER OF ACCEPTANCE - PROOF OF ACCEPTANCE INTO THE EDUCATIONAL INSTITUTION YOU WILL ATTEND (Holy Cross or Hellenic College).**
- 2) **PROFILE OF YOURSELF:** PLEASE STRESS FACTORS RELEVANT TO YOUR OCCUPATIONAL CHOICE AND GOALS. LIST QUALIFICATIONS YOU POSSES IN ORDER TO PURSUE YOUR EDUCATION FOR YOUR CHOSEN PROFESSION.  
*(Limit to one typewritten page)*

*All information required must be sent to:* Mrs. Renna Lemberis  
St. Helen Women's Philoptochos  
11025 South Roberts Road  
Palos Hills, IL 60465  
Attn: SCHOLARSHIP

Signature of Applicant \_\_\_\_\_ Date Completed \_\_\_\_\_