



Office Use Only

Date Received _____

Application Reviewed _____

Eugene "Sam" Kunst Endowed Memorial Scholarship Application Form

Date Submitted: _____ School Year Applying For: _____

Date PSAS Mailed: _____ Parish: _____

8th grade GPA: _____ Name of Junior High/Elementary School: _____

Student's Full Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ email: _____

Date of Birth: _____ Sex: M ___ F ___

Father's Full Name: _____

Mother's Full Name: _____

Athletic activities: Please complete attached document.

Application Essay: Please describe your interest in Catholic school education and your qualifications for this scholarship. *Essay should be 250-500 words, double spaced and typewritten. Please attach essay to your application materials.*

School Administration verifies that Student is in good standing with no current student or athletic probation

Signature of School Administrator

Date

Applications Accepted: February 1 through April 1

- CC Freshmen
- Must be from St. Francis Xavier Parish
- Must be a male student
- Based on financial need
- Minimum 3.0 GPA
- Must participate in athletics
- Renewable for three (3) years, provided the student maintains a 3.0 GPA



Name _____

Scholarship _____

CC ___ WC ___ Both ___ Date _____

Community Service Activities/Extracurricular Activities/ Awards and Honors

Please list your Christian Service:

Dates From/To (i.e. 12/08-12/09)	Hours	Christian Service Activities	Organization

Please list your Extracurricular Activities:

Dates From/To (i.e. 12/08-12/09)	Hours	Extracurricular Activities	Organization

Please list your Awards and Honors:

Dates From/To (i.e. 12/08-12/09)	Awards & Honors Received