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# **Our Lady of Victory Parish Scholarship Application 2026**

**Please complete this application  
and return it with the required  
documents by May 14, 2026**

**Our Lady of Victory Parish  
Scholarship Committee  
230 South Main Street  
Centerville, MA 02632**

# Our Lady of Victory Parish Scholarship Application

Applicants must be active, registered members of Our Lady of Victory Parish.  
Please fill out this form completely, accurately, and neatly.

The deadline for applications is: May 14, 2026

Incomplete and/or late submissions will not be considered.

Scholarships will be awarded after successful completion of a four year program.

Student Name \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Parent's Email: \_\_\_\_\_  
(Please do not use your high school email address)

Birth Date \_\_\_\_\_ Birth Place \_\_\_\_\_

What do you plan to study, and what are your plans after college?

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What college will you attend, or what are your top choices?	Total Cost
1 <sup>st</sup> _____ (Will attend? ____)	\$ _____
2 <sup>nd</sup> _____	\$ _____
3 <sup>rd</sup> _____	\$ _____

List all scholarships, grants, financial aid that you have been awarded.	Total Aid
_____	\$ _____
_____	\$ _____
_____	\$ _____

Please list other scholarships you have applied for or may receive:

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Estimated Parental Contribution \$ \_\_\_\_\_

Estimated Student Contribution \$ \_\_\_\_\_

Have you applied for federal aid by submitting a FAFSA? \_\_\_\_\_

Will you commute to school? \_\_\_\_\_

Total Anticipated Financial Need \$ \_\_\_\_\_

## Personal Information Record

Father's or Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Mother's or Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Total number of dependents in family including self and parents: \_\_\_\_\_

List all immediate family members attending college full time.

Name:	Age:	Relationship:	School:
_____	_____	_____	_____
_____	_____	_____	_____

Name:	Age:	Relationship:	School:
_____	_____	_____	_____

In what ways have you been actively involved with Our Lady of Victory Parish?

List all school and community activities, honors, prizes, offices held, etc.

### Work Experience

Job:	From:	To:	Earnings: \$
_____	_____	_____	_____

_____	_____	_____	_____
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_____	_____	_____	_____
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_____	_____	_____	_____
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Are there any unusual circumstances that the scholarship committee should be aware of?

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

How do you intend to meet the major cost of your education?

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Why are you applying for this particular scholarship?

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Please write briefly about why you feel it is important to continue your education.

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How will you continue to actively practice your Catholic faith during your college years and beyond?

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Please include a transcript of your grades and a sealed letter of recommendation with your completed application. The deadline for applications is: May 14, 2026.

Please drop off, or mail your completed application, transcript and sealed recommendation letter to:

Our Lady of Victory Parish Scholarship Committee  
230 South Main Street  
Centerville, MA 02632

I affirm that the above information is correct and that I wish to be considered for a scholarship to be used specifically for college education expenses.

Student Signature:

Date:

Parent Signature:

Date: