



**SAINT FRANCIS PREP  
SCHOLARSHIP FORM**

**CEEB CODE:  
330835**

<b>STUDENT NAME:</b>	<b>TODAY'S DATE:</b>
<b>STUDENT E-MAIL:</b>	
<b>COUNSELOR'S NAME:</b>	<b>DEADLINE:</b>

**SCHOLARSHIP**

**NAME OF SCHOLARSHIP:**

**MAILING ADDRESS FOR SCHOLARSHIP :**

**PHONE NUMBER:**

**FAX NUMBER:**

**SCHOLARSHIP APPLICATIONS THAT REQUIRE A TRANSCRIPT MUST BE SUBMITTED THE SAME WAY AS ANY COLLEGE APPLICATION (ENVELOPE, TRANSCRIPT FEE, STAMPS, ETC.) APPLICATIONS FOR SCHOLARSHIPS MUST BE PRESENTED TO THE COLLEGE OFFICE ONE MONTH PRIOR TO THE SCHOLARSHIP DEADLINE DATE.**

**REMINDER: IT IS THE RESPONSIBILITY OF EACH STUDENT TO SEND THEIR SAT/ACT SCORES FOR EACH SCHOLARSHIP THAT THEY APPLY. THIS CAN BE DONE AT [www.sat.collegeboard.com](http://www.sat.collegeboard.com) and/or [www.act.org](http://www.act.org).**

**STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_**

**[FOR GUIDANCE DEPARTMENT USE ONLY]**

**COLLEGE OFFICE: \_\_\_\_\_ COUNSELOR INITIALS: \_\_\_\_\_ PAID: \_\_\_\_\_**