

**The Albert Lenhard, St. Matthews,
St. Martin de Porres Scholarship Fund**

**555 Northampton Street
Buffalo, NY 14208
716-883-7729**

Personal Information

Name: _____

Address: _____

Is this your primary address: Yes No (Circle)

Phone: _____ DOB: _____

SS#: _____ - _____ - _____ e-Mail: _____

If under 18:

Name of Parents(s)/Legal Guardians: _____

Phone: _____

Education

High School: _____ Grad Date: _____

College: Accepted / Applied (circle one) to: _____

Address: _____

Student ID: _____ Status: Full-time Part-time (circle)

Major: _____ Minor: _____

Current Status

Upcoming Year: Fresh Soph Jun Sen Grad Student Exp Graduation Date: _____

Essay

Each candidate is required to write and attach an essay, no more than two pages (double spaced) in length, describing their financial situation, personal circumstances, career goals, progress, reasons for application or reapplication, and anything else the candidate deems necessary for the review committee to know.

INCOME TAX STATUS

1. Circle which best applies to the previous year Tax preparations:

Dependent on Parents/Legal Guardian/Spouse return

Not a Dependent on Parents/Legal Guardian/Spouse return

Filed separately

EMPLOYMENT HISTORY

2. Circle which best applies to your situation for the coming school year:

Summer employment only

Work Study

Part Time Job

Full Time Job

COLLEGE ENROLLMENT

3. Circle which best applies to your current/future enrollment:

Part Time Student

Full Time Student

STUDENT HOUSING

4. Circle which best applies to your housing situation for your college school year:

Campus Housing

Living at Home

Independent Living without dependents

Independent Living with dependents

TUITION & SCHOLARSHIPS

5. Please list the following amounts as accurately as possible as it applies to your situation:

Full Time / Part Time Semester Tuition Costs _____

Estimate Book & Supply Fees _____

Financial Scholarships awarded to date _____

(Any special circumstances, which explain or provide further detail for the above should be described in the essay)

I testify to the best of my knowledge that all above information and all information contained in the essay is true.

Student Signature: _____ Date: _____

If under 18:

Parent/Legal Guardian: _____ Date: _____

FORM AND ACCOMPANYING ESSAY MUST BE RECEIVED BY: Friday, December 6, 2019.