



January 2, 2019

Dear Applicant:

The Parish of St. Bernard of Clairvaux is proud to announce the eleventh academic year of our scholarship for pursuing a higher education at a **Catholic University**. These funds are made possible by the Parish of St. Bernard of Clairvaux's portion of the Diocese of Tulsa Fund for the Future monies which have been set aside in the St. Bernard of Clairvaux Educational Trust.

In order to apply for a one of these scholarships the student or their family must be parishioners of the Parish of St. Bernard of Clairvaux and be pursuing or plan to pursue a higher education at a Catholic University. The Scholarship Committee asks that the following documents be completed and returned to the Parish Office no later than **April 21, 2019**:

1. Parent/Guardian statement, and a
2. Principal/Dean statement

The Scholarship Committee would also ask that the applicant write at least a one-page letter to the Committee, which details:

1. The Catholic University you are or will be attending,
2. why you have chosen this Catholic University,
3. why these scholarship funds would be important to your pursuing a degree at the Catholic University you have chosen,
4. volunteering and other activities you are involved in,
5. Other special consideration: Students who do not qualify under normal criteria (such as financial need or academic potential i.e. 2.5 on a 4.0 scale) due to health, cultural deprivations, learning disabilities, etc. will be given consideration by the Committee.

SCHOLARSHIP AWARDS COMMITTEE  
ST. BERNARD EDUCATIONAL TRUST  
4001 EAST 101ST STREET, TULSA, OK 74137  
918/299-9406

These scholarships will be awarded for four years with the condition

1. you maintain a good grade level (which the Scholarship Committee has defined as a cumulative G.P.A. of 2.5 on a 4.0 scale),
2. make satisfactory progress with your degree program,
3. continue to exhibit good moral and social habits,
4. active participation in the Catholic Church,
5. you or your family remain parishioners of the Parish of St. Bernard of Clairvaux,
6. enrollment verification from the Catholic University of your choice.

If you are awarded a scholarship you must upon enrollment supply the scholarship committee with a copy of your enrollment verification. Then in the fall of 2019, we will disburse the yearly scholarship funds to the school's business office, to be applied to your account.

If you are awarded a scholarship, after the completion of the Fall 2019 and Spring 2020 semesters, you must present the committee with a transcript of your grades and your enrollment verification for the Fall 2020 semester.

The Scholarship Committee will consider an applicant only when the data is received and complete. The deadline for submitting your application is April 21, 2019. Notification of the scholarship will be made in June 2019. All information and data received by the committee will be held in strict confidence.

Sincerely,

*Christi Johnson*

Christi A. Johnson  
Scholarship Selection Committee Chairwoman

COLLEGE SCHOLARSHIP PROGRAM  
2019/2020 SCHOOL YEAR

PRINCIPAL/DEAN STATEMENT

One of your students, \_\_\_\_\_ has applied to THE PARISH OF ST. BERNARD OF CLAIRVAUX for financial assistance in order to continue their education. To enable the Scholarship Awards Committee to make a more informed appraisal of this student's application, please complete this form and return to the above address by APRIL 21, 2019.

Your response will be held in strict confidence. Thank you for your cooperation.

RECOMMENDATION

STUDENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

AUTHORIZATION

I hereby authorize \_\_\_\_\_ High School to release my academic records to The Parish of St. Bernard of Clairvaux Educational Trust Scholarship Committee.

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

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

(Above portion to be completed by the applicant.)

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(Below portion to be completed by the Principal/Dean.)

SCHOLARSHIP AWARDS COMMITTEE  
ST. BERNARD EDUCATIONAL TRUST  
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1. How long has the student been in your school? \_\_\_\_\_
2. What is his/her academic rank in class? \_\_\_\_\_
3. SAT Score \_\_\_\_\_ ACT Score \_\_\_\_\_  
Weighted GPA \_\_\_\_\_ Un-weighted GPA \_\_\_\_\_
4. INCLUDE A TRANSCRIPT WHICH INCLUDES THE FALL SEMESTER GRADES.
5. If there are other comments, please include below or attach them to this form.

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Signature

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Name Printed

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Title

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School

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Street Address

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City, State, Zip

**COLLEGE SCHOLARSHIP PROGRAM  
2019/2020 SCHOOL YEAR**

**STUDENT  
PARENT/GUARDIAN STATEMENT**

To help the selection committee make a more valid appraisal of each application, it is necessary that the parent/guardian complete this form. All information provided will be held in strict confidence. **Please attach a current photograph to this application.** After completion, drop off or mail the application by **April 21, 2019.**

STUDENT

\_\_\_\_\_

(First)

(Middle)

(Last)

HOME  
ADDRESS

\_\_\_\_\_

(Street/Post Office Box)

(City)

(State)

(Zip+4)

PHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_ Text: Yes or No  
(Cell)

(\_\_\_\_\_) \_\_\_\_\_  
(Home)

E-MAIL ADDRESS: \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_

HIGH SCHOOL OR COLLEGE OR UNIVERSITY  
GRADE POINT AVERAGE THROUGH  
DECEMBER 31, 2019.

(A transcript, which includes the fall semester grades, is required)

\_\_\_\_\_ (Overall GPA)

\_\_\_\_\_ (Major GPA-for transfer students only)

COLLEGE OR UNIVERSITY \_\_\_\_\_

EXPECTED GRADUATION DATE \_\_\_\_\_

DEGREE \_\_\_\_\_ MAJOR \_\_\_\_\_

MINOR \_\_\_\_\_

TOTAL NUMBER OF HOURS COMPLETED THROUGH DECEMBER 31, 2019.

\_\_\_\_\_

SCHOLARSHIP AWARDS COMMITTEE  
ST. BERNARD EDUCATIONAL TRUST  
4001 EAST 101ST STREET, TULSA, OK 74137  
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1. FATHER'S NAME \_\_\_\_\_  
Living Yes \_\_\_ No \_\_\_
2. MOTHER'S NAME \_\_\_\_\_  
Living Yes \_\_\_ No \_\_\_
3. Is your family registered as parishioners of the Parish of St. Bernard of Clairvaux?  
Yes \_\_\_ No \_\_\_
4. Number of other dependent children and their ages:  
\_\_\_\_\_
5. Are there any other post-high school students in family unit? Yes \_\_\_ No \_\_\_
6. Are there elementary or secondary students attending Catholic Schools?  
Yes \_\_\_ No \_\_\_
7. Parent/Guardian's occupations \_\_\_\_\_  
(Father) (Mother)
8. Anticipated family income for 2019 \_\_\_\_\_
9. Copy of the FAFSA Student Aid Report (SAR).
10. List activities and organizations in which you have participated and honors and awards you have received:

Year    Activities and Organizations




<u>Source</u>	<u>Amount</u>
_____	\$ _____
_____	\$ _____

Loans:

<u>Source</u>	<u>Amount</u>
_____	\$ _____
_____	\$ _____

Support from Parents \$ \_\_\_\_\_

Support from Spouse \$ \_\_\_\_\_

Personal Support:

Summer Jobs \$ \_\_\_\_\_

Part-time Jobs During School \$ \_\_\_\_\_

\$ \_\_\_\_\_

Other (Specify Source):

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Total

=====

13. Special Consideration: Students who do not qualify under normal criteria (such as financial need or academic potential i.e. 2.5 on a 4.0 scale) due to health, cultural deprivations, learning disabilities, etc. will be given consideration by the Committee. A detailed explanation of the student's circumstances must accompany this application.

You are encouraged to include any additional information or comments, which might be helpful to the Selection Committee.

All requested information must be included.

SCHOLARSHIP AWARDS COMMITTEE  
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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature  
 Parent  
 Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature  
Student