## St. Thomas More Catholic Boys' High School Alumni Association ARCHDIOCESE OF PHILADELPHIA SCHOLARSHIP APPLICATION

**DEADLINE**: Must be received by the Scholarship Committee **no later than December 31, 2023** for the school year September 2024-June 2025

> MAIL TO: Saint Thomas More Scholarship Committee, 7036 Woodbine Avenue, Philadelphia, PA 19151. Checks payable to STMAA.

## PLEASE COMPLETE THE FOLLOWING AND RETURN WITHOUT ATTACHMENTS. ONLY ONE STUDENT PER APPLICATION. PRINT YOUR ANSWERS TO ALL QUESTIONS 1-18 ON THIS APPLICATION.

1) <u>Sponsor's</u> Name				
2) Address				
3) Phone	4) Email			
5) Is Sponsor a STM graduate? Yes	No	Year		
6) If not, who in the family is an STM g	graduate?			
Name	Relationship			
Address	Phone	E	Email	
Class of				
7) Please give Sponsor's relationship to	student (Grandparent,	, Parent, Uncle, I	Friend, etc.) _	
8) Is Sponsor a dues-paying member of	the STM Alumni Ass	ociation? Yes_		No
9) Does Sponsor participate in STM Ale	umni Events? Yes		No	
If yes, explain				
10) <u>Student's</u> Name		11) Email		
12) Student's Address				
13) Student's Present School and Grade				

14) Has the <u>parent</u> of Student paid the \$40.00 Membership dues for 2024? <b>Paid Membership is now a requirement for applying for a Scholarship.</b> Yes	No
If 'No', please submit check payable to STMAA with application.	
15) School and Grade student will attend in September 2024	
SCHOOL:	_GRADE:
16) Did you receive a STM Scholarship in the past? YesNo	
17) What year(s) was that Scholarship awarded?	
18) Have you attended the Communion Breakfast and Mass in 2023 or prior years? Yes	No
Please be aware that scholarships are awarded primarily to Students sponsored by dues-pa descendants/relatives of STM graduates who will attend a Philadelphia Catholic Archdioc Committee reserves the right to make exceptions. Dues-paying members may include fam friends of STM Alumni Association as well as graduates of STM. Please see our website a to get information on being a STMAA supporter.	esan School. The ily members and
* By signing below, I attest and affirm that the information above is true and accurate a Scholarship, I agree to the use of my child's name and likeness in publication of t winners. If chosen, we (Sponsor, Parents or Guardians and Student) hereby agree Mass (9am at the Cathedral Basilica of Sts Peter & Paul, 1723 Race St, Phila.) and Breakfast (11am at the Sheraton Hotel, 201 North 17 <sup>th</sup> St., Phila.) to be held <u>Sunda</u> a condition of receiving a scholarship	he scholarship to attend the STM Communion
Student Signature Date _	
Parent or Guardian signature Date	

\_Date\_\_\_\_\_

Sponsor Signature\_\_\_\_\_

STUDENT'S PARISH \_\_\_\_\_