## St. Thomas More Catholic Boys' High School Alumni Association NATIONAL SCHOLARSHIP APPLICATION

Education Grant Application for students planning to attend a Catholic High School in a Diocese other than Philadelphia.

**DEADLINE**: Must be received by the Scholarship Committee **no later than December 31, 2025** for the school year September 2026-June 2027

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) Sponsor's 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	¶ graduate?			
Name	Relationship			
Address	Phone		Email	
Class of				
7) Please give Sponsor's relationship	to student (Grandpa	arent, Parent, U	ncle, Friend, etc	:.)
8) Is Sponsor a dues-paying member				
9) Does Sponsor participate in STM	Alumni Events? Ye	es	No	
If yes, explain				
10) <u>Student's</u> Name		11) H	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 <b>Paid Membership is now a requirement for applying for a S</b>	
If 'No', please submit check payable to STMAA with application	on.
15) School and Grade student will attend in September 2026	
SCHOOL:	GRADE:
16) Did you receive a STM Scholarship in the past? Yes	_No
17) What year(s) was that Scholarship awarded?	
18) Have you attended the Communion Breakfast and Mass in 2025	or prior years? YesNo
Please be aware that scholarships are awarded primarily to Students descendants/relatives of STM graduates. The Committee reserves the members may include family members and friends of STM Alumni Please see our website at <b>STMForever.com</b> to get information on the state of the	ne right to make exceptions. Dues-paying Association as well as graduates of STM.
* By signing below, I attest and affirm that the information abora Scholarship, I agree to the use of my child's name and likenwinners. If chosen, we (Sponsor, Parents or Guardians and Stwhen possible to attend the STM Mass (9:15am at St. Kevin's Communion Breakfast (11am–2pm at Springfield Country Clas a condition of receiving a scholarship.	ess in publication of the scholarship udent) hereby agree make every effort Church, Springfield, PA) and
Student Signature	Date
Parent or Guardian Signature	Date
Sponsor Signature	Date
STUDENT'S PARISH	