

# SCHOLARSHIP APPLICATION

## (Part 1)

Name:(Last, First)\_\_\_\_\_ Ethnicity: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Age: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Name and Location of College/Trade School: \_\_\_\_\_

\_\_\_\_\_ College Phone Number: \_\_\_\_\_

GPA: \_\_\_\_\_ Enrollment Date: \_\_\_\_\_ Major/Minor: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_ Purpose for Scholarship: \_\_\_\_\_

List Academic Honors/Awards: \_\_\_\_\_

List Volunteer Activities: \_\_\_\_\_

Provide contact names and telephone numbers for volunteer activities performed:

1) \_\_\_\_\_

2) \_\_\_\_\_

Please explain why you should be selected for Our Daily Bread's Scholarship

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### **Items Needed:**

**Scholarship Application**

**Prior Semester's Transcript**

**Two Letters of Recommendations**

**Deadline: 12/1/24 by Midnight**

**Fax to: 1-866-804-0971 or email: ourdailybreadmil@att.net**

**NO TELEPHONE CALLS PLEASE**