

MAE LASSLEY CATHOLIC OSAGE SCHOLARSHIP
APPRAISAL FORM

STUDENT: FILL IN YOUR NAME, APPLICATION INFORMATION, HIGH SCHOOL OR COLLEGE LAST ATTENDED, CITY AND STATE, AND SEND THIS FORM TO ONE OF THE FOLLOWING: YOUR HIGH SCHOOL PRINCIPAL, COUNSELOR, OR COLLEGE PROFESSOR.

NAME OF STUDENT ADDRESS

HIGH SCHOOL OR COLLEGE LAST ATTENDED CITY STATE

THE FOLLOWING IS MY PERSONAL, CONFIDENTIAL RECOMMENDATION OF THE STUDENT NAMED ABOVE FOR FINANCIAL AID CONSIDERATION.

TO BE FILLED IN BY PRINCIPAL, PROFESSOR OR COUNSELOR ONLY PERIOD OF ACQUAINTANCE

NAME OF HIGH SCHOOL OR COLLEGE SIGNATURE

CLASS RANK OF STUDENT G.P.A. PROFESSION & TITLE

ADDRESS

RETURN TO: OSAGE SCHOLARSHIP FUND
P.O. BOX 690240
TULSA, OK 74169
918-294-1904

MUST BE COMPLETED AND RETURNED BY APRIL 15, 2024.