

2019 Archbishop Hoban Scholarship Application

This page is to be completed by the applicant.

Please type or print all information.

Indicate with an "X" the school you plan to attend. One choice only		
Ursuline College <input type="checkbox"/>	John Carroll University <input type="checkbox"/>	Notre Dame College <input type="checkbox"/>
Applicant Information		
Last Name:		
First Name:	Middle Initial:	Sex: Please check one Male Female
Address:		
City:	State:	ZIP Code:
High School Presently Attending:		
Father/Guardian Occupation:		
Mother/Guardian Occupation:		
2018 Parent(s)/Guardian income earned from work: \$		
Parent/Guardian has _____ dependents, including spouse, if living.		
Children's Ages:		
Are there any special circumstances that may place a burden on your family?		
Such as: <input type="checkbox"/> Medical and/or dental expenses; <input type="checkbox"/> Children in college; <input type="checkbox"/> Death of a parent; <input type="checkbox"/> Loss of income due to unemployment or a change of parental marital status.		
Please indicate and explain below:		
Did you earn any money while in high school (including summers)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What type of work did you do?		
Did you do any volunteer work? If so, what type?		
How much did you earn in 2018?	\$	
How much did you earn in 2017 and prior years, if applicable?	\$	
High school grade average (7 th semester)		
Class rank (7 th semester)	Number in Senior class	
What general course do you plan to take in college?		

