



ST. JOHN'S ACADEMY SCHOLARSHIP APPLICATION

To be completed by the applicant:

Name of Applicant: _____ Date of Birth: _____

Address: _____

Email address: _____

Cumulative GPA _____ Class Ranking _____ in class of _____ at _____ High School

Colleges being considered, in order of preference: On-campus Commuter Full Time

1. _____

2. _____

3. _____

Describe your educational and career plans: _____

Parents Name:

Father: _____

Mother: _____

Descended from the following former student/students of St. John's Academy which had students enrolled from 1921-1933: _____

Applicant's signature: _____

Parent's signature: _____

Date of signatures: _____/_____/201__

List three professional and personal references who are not family members.

Name and title	Street Address	City	State	Zip	Telephone
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please submit **completed application, résumé, transcript, and personal essay which describes your relationship (kinship) to former students of the Academy** prior to **April 30**

to: **Jo Ann Snyder Harman, 5294 Patterson Creek Road, Lahmansville, WV 26731.**