

**SAINT THOMAS MORE SOCIETY  
SCHOLARSHIP APPLICATION FORM**

PLEASE PRINT OR TYPE

Date: \_\_\_\_\_

APPLICANT'S NAME:

\_\_\_\_\_

Last

First

Middle

\_\_\_\_\_

Age

Parish

PERMANENT ADDRESS:

\_\_\_\_\_

Street

\_\_\_\_\_

City or Town

Zip Code

TEMPORARY ADDRESS:

\_\_\_\_\_

Street

\_\_\_\_\_

City or Town

Zip Code

COLLEGE(S) ATTENDED:

\_\_\_\_\_  
\_\_\_\_\_

DEGREE(S) RECEIVED:

\_\_\_\_\_  
\_\_\_\_\_

LAW SCHOOL APPLICANT IS ATTENDING OR WILL ATTEND:

\_\_\_\_\_  
\_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_

NAME OF SPOUSE: \_\_\_\_\_

OCCUPATION OF SPOUSE: \_\_\_\_\_

CHILDREN: \_\_\_\_\_ AGE \_\_\_\_\_

\_\_\_\_\_ AGE \_\_\_\_\_

\_\_\_\_\_ AGE \_\_\_\_\_

MILITARY VETERAN: \_\_\_\_\_  
yes\*

\_\_\_\_\_  
no

\*If yes:

Branch of Service \_\_\_\_\_

Years of Service \_\_\_\_\_ Honorable Discharge \_\_\_\_\_  
yes no

**AWARDS AND ACHIEVEMENTS:**

1. Please list any school honors, awards, and scholastic achievements.

2. Please list any community, civic, or parish activities and/or recognitions you have received.

I hereby affirm that the information contained in the above application and accompanying financial statement is accurate and true to the best of my knowledge and belief.

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APPLICANT

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PARENT

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PARENT