

# AWARDS / SCHOLARSHIP / BURSARY INFORMATION

<b>NAME:</b>	<b>GRADE:</b>	<b>HOMEROOM:</b>	
<b>Parish: (In which Parish area do you live?)</b>		<b>Which Parish do you attend?</b>	
<b>HOUSEHOLD INCOME (optional)</b>	<input type="checkbox"/> Below \$15,000 <input type="checkbox"/> Between \$15,000 - \$29,999 <input type="checkbox"/> Between \$30,000 - \$49,000 <input type="checkbox"/> Between \$50,000 - \$74,999 <input type="checkbox"/> Over \$75,000		
	Number of Siblings Living at Home including Yourself    0   1   2   3   4   5   6   7   8		
	Number of Siblings in College/University                    0   1   2   3   4   5		
<b>PLANS FOR NEXT YEAR</b>	<input type="checkbox"/> College <input type="checkbox"/> University <input type="checkbox"/> Return to Msgr. Doyle <input type="checkbox"/> Apprenticeship <input type="checkbox"/> Other _____		
<b>EDUCATIONAL INTENTIONS</b>	Please list top 3 colleges/universities to which you have or intend to apply in order of priority. (i.e. No. 1 = first choice)		<b>College or University</b> 1. _____ 2. _____ 3. _____
			<b>Program</b> 1. _____ 2. _____ 3. _____
<b>SCHOOL CLUBS</b>	<b>Club</b>	<b>Number of Hours</b>	<b>Year</b>
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
<b>SCHOOL TEAM INVOLVEMENT</b>	<b>Team</b>	<b>Year</b>	<b>Team</b>
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
<b>SINGLE DOYLE EVENTS</b> <small>(plays, retreats, activities, math, programming, contests, technology)</small>	<b>Club</b>	<b>Number of Hours</b>	<b>Year</b>
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

<b>COMMUNITY INVOLVEMENT</b>	Position / Description _____ _____ _____	Organizations _____ _____ _____	Hours _____ _____ _____	Year _____ _____ _____
<b>VOLUNTEER POSITIONS</b>	Position / Description _____ _____ _____	Organizations _____ _____ _____	Hours _____ _____ _____	Year _____ _____ _____
<b>PART TIME JOBS</b>	Job(s) _____ _____ _____ _____	Average Hours Per Week _____ _____ _____ _____	Year _____ _____ _____ _____	
<b>PERSONAL OBSTACLES</b>  (death, illness, etc.)	Describe: _____ _____ _____ _____ _____ _____			
<b>AWARDS RECEIVED &amp; OTHER INVOLVEMENTS NOT ALREADY LISTED</b>	Describe: _____ _____ _____ _____ _____			

**PLEASE RETURN TO GUIDANCE**