



Holy Spirit College Undergraduate Grant Application 2019-20

Holy Spirit College is pleased to offer grants to students with demonstrated financial need. Using this application, the business office at the College in conjunction with other College officials will award available need-based grant funds. These grants come in the form of up to 90 percent tuition remission, along with a 6 hours per week work study requirement (August through July).

Who may apply

Students with demonstrated financial need (as outlined in this application).

Dates and Deadlines

Applications are considered on a rolling basis. Applications will be reviewed beginning after Easter.

Applicant Information

Name _____ Phone _____

Address _____ City _____ State _____ ZIP _____

High School _____ City _____ State _____ ZIP _____

GPA _____ Email _____

The course of study I plan to pursue while at Holy Spirit College:

Business and Entrepreneurship _____

Catholic Classical Education _____

Philosophy, Politics, and Economics _____

Pre-Law _____

Theology _____

Other (If undecided please list some studies/professions you are interested in)

In compliance with the requirements for this grant, I submit the following information:

- A completed online or paper Holy Spirit College Undergraduate Application form (available at www.holyspiritcollege.org).
- An official high school transcript.
- CLT, SAT or ACT test scores.
- Statement of Faith and interest in studying the Roman Catholic intellectual tradition (1,000 words or less, as part of the College application)
- Two letters of recommendation from persons not related to the applicant. At least one recommendation must be from an academic source.

FAMILY INFORMATION

Father's Name _____ Occupation _____
Address _____ City _____ State _____ Zip _____
(only if different from applicant)

Mother's Name _____ Occupation _____
Address _____ City _____ State _____ Zip _____
(only if different from applicant)

Name of the Roman Catholic Church you attend _____ City _____

APPLICANT'S WORK INFORMATION

Are you presently employed? Yes _____ No _____ (if yes, name of employer) _____

What are some of your job responsibilities? (list below) How many hours per week do you work? _____

TO THE APPLICANT'S PARENTS OR GUARDIANS

Applicant's number of siblings _____ Number of applicant's siblings currently in college _____

The income level of the family is: A. _____ Under \$50,000 B. _____ \$50,001 - \$100,000

C. _____ \$100,001 - \$150,000 D. _____ \$150,001 and above (Please be sure to check one.)

We certify that the information submitted herewith is true to the best of our knowledge.

Signature of Parent/Guardian _____ Date _____

Signature of Applicant _____ Date _____

Please send completed forms and applications to kschulman@holyspiritcollege.org, or mail materials to:

Holy Spirit College

Undergraduate Admissions

4465 Northside Dr. NW

Atlanta, Georgia 30327