

**Blessed Sacrament Church
263 Claremont Avenue
Tn. Tonawanda, New York 14223**

Committed To Educating Students for Their Role in the Church and World of Tomorrow

Scholarship Application For 2017-2018 Academic Year

Harold J. Diebold & Marion A. Diebold Scholarship Fund

The **Harold J. Diebold & Marion A. Diebold Scholarship Fund** has been established “to benefit parish students” by enabling children of needy parishioners of the church to attend local **Catholic elementary schools**.

Mary Masterson Memorial Scholarship Fund

The **Mary Masterson Memorial Scholarship Fund** has been established “to benefit parish students” by enabling children of needy parishioners of the church to attend local **Colleges**.

Deadline for this application is April 15th, 2017

Eligibility:

- The family applying for assistance actively participates in the sacramental and community life of the parish. Regular attendance at Mass is expected.
- The student must be a person of sound moral character, possess leadership qualities, be actively involved in the school and/or parish and maintains a B average. Failure to do so will render the recipient ineligible for an award for a future year. **(Please submit a copy of most recent report card)**.
- There is evident financial need. Submission of the FACTS Grant & Aid Application will be required **ONLINE ONLY** – <https://online.factsmgt.com/signin/3MG4Y>

**Annual Income Eligibility Scale for 2017-2018 School Year
Maximum Income Based on 2016 Household Income**

| Household Size | Maximum Income |
|----------------|----------------|
| 2 | 42,174 |
| 3 | 53,038 |
| 4 | 63,900 |
| 5 | 74,762 |
| 6 | 85,626 |
| 7 | 96,490 |
| 8 | 107,352 |

PLEASE NOTE: SELECT BLESSED SACRAMENT AS THE SCHOOL ON THE FACTS APP.

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***Harold J. Diebold & Marion A. Diebold Scholarship Fund
Mary Masterson Memorial Scholarship Fund
Application For 2017-2018 Academic Year
(All applications are due by April 15th, 2017)***

Applicant Information:

Family Name: _____
(Last) (Father's First) (Mother's First)

Address: _____
(Street) (City) (Zip)

Phone: _____ E-Mail: _____

Student Name: _____ Grade _____

Student Name: _____ Grade _____

Student Name: _____ Grade _____

Student Name: _____ Grade _____

School child(ren) will be attending _____

Address _____

Phone _____

Tuition for family _____

FOR OFFICE ONLY

REVIEWED BY _____ DATE _____

_____ FACTS APPLICATION FILED _____ CHURCH ATTENDANCE _____ REPORT CARD(S)

_____ CONFIDENTIAL INFORMATION _____ PARISH/COMMUNITY PARTICIPATION

_____ DIEBOLD OR MASTERSON SCHOLARSHIP APPROVED _____ AMOUNT

Number of Students _____

Please provide any other information that will help us understand your financial need. Feel free to attach other information. (This information is kept strictly confidential and limited to pastor and committee leader)

Please tell us about your family’s active participation in the sacramental and communal life of the parish community.

_____ *We are:*

_____ *We would like to be:*

_____ Altar Server _____ Eucharistic Minister _____ Lector _____ Usher
_____ Choir _____ Greeter _____ Children’s Liturgy of the Word

We can help with:

_____ Parish Fundraisers _____ Religious Education _____ Coffee Hour
_____ Gardening _____ Other (please explain below)

I certify that our family is financially eligible based on the income eligibility chart and to the best of my knowledge that all the above listed information is true and correct.

Signature

Date

PLEASE RETURN THIS FORM AND COPY OF REPORT CARD(S) TO BLESSED SACRAMENT CHURCH – ATTN: SCHOLARSHIP COMMITTEE. ALL OTHER FORMS AND FINANCIAL INFORMATION MUST BE SUBMITTED ONLINE TO FACTS.