

ATTENTION!

OUTSTANDING DIOCESAN CATHOLIC FEMALE HIGH SCHOOL SENIORS

You are invited to apply for

THE SPRINGFIELD IN ILLINOIS DIOCESAN COUNCIL OF CATHOLIC WOMEN (SDCCW) FEMALE HIGH SCHOOL SENIOR LEADERSHIP SCHOLARSHIP

(Scholarship includes all (Catholic & Public) Schools & all Catholic Churches in the Springfield IL Diocese)

The Springfield in Illinois SDCCW, an Affiliate of the National Council of Catholic Women, has instituted a Diocesan Scholarship Program to recognize outstanding Catholic, female high school seniors who exemplify SDCCW's mission, values of leadership, faith and service.

FOUR \$500 SCHOLARSHIPS

Springfield in Illinois Diocesan Council of Catholic Women will select the recipients from the Springfield Diocese and notify the winning applicant, her school, and parish by May 1, 2021.
The results will be published in the Catholic Times.

Young women who are interested in applying for the scholarship should contact their high school principle, high school guidance office or parish office for applications. **A typed completed application, essay, and two letters of recommendation are required.**

Send application, essay and letters of recommendation to:

Mary Ann Sullivan
15764 E. 1375th Rd
Paris IL 61944
Email: schsdccw@gmail.com
PHONE: 217-463-2435

DEADLINE:

APPLICATION, ESSAY, AND TWO
LETTERS OF RECOMMENDATIONS
MUST BE SENT TOGETHER AND
POSTMARKED BY MARCH 30,
2021

MISSION STATEMENT

As an affiliate of the National Council of Catholic Women (NCCW) we act through their guidance and our affiliated organizations and members to support, empower and educate all Catholic women in Spirituality, Leadership and Service. Like NCCW, the Springfield in Illinois Diocesan Council of Catholic Women (SDCCW) programs respond with Gospel values to the needs of the Church and Society in the modern world.

SDCCW SCHOLARSHIP APPLICATION

A. FULL NAME: _____

B. FULL ADDRESS (INCLUDE EMAIL, TELEPHONE &/or CELL)

Address _____

Email _____

Phone _____

C. PARENT / GUARDIAN: _____

D. HIGH SCHOOL NAME, ADDRESS & PHONE ; NAMES OF PRINCIPAL AND SCHOOL COUNSELOR

School name: _____

Address: _____

Phone: _____

Principal/Counselor _____

E. DATE OF GRADUATION: _____

F. CLASS RANK AND GRADE POINT AVERAGE: _____

G. HOME PARISH, ADDRESS, PHONE NUMBER AND PASTOR'S NAME:

Parish: _____

Address: _____

Phone: _____

Pastor's Name: _____

H. EXTRA-CURRICULAR HIGH SCHOOL AND COMMUNITY SERVICE ACTIVITIES:

I. SUBMIT WITH THIS APPLICATION: A TWO PAGE (MAXIMUM) TYPED ESSAY TO SHOW HOW YOU EXEMPLIFIED THE VALUES OF LEADERSHIP, FAITH, AND SERVICE IN YOUR COMMUNITY, PARISH, AND SCHOOL.

ALSO INCLUDE : TWO LETTERS OF RECOMMENDATION FROM PERSONS WELL ACQUAINTED WITH YOU THROUGH SCHOOL OR CHURCH.

DEADLINE: Post marked by MARCH 30, 2021

SEND APPLICATION, ESSAY AND LETTERS OF RECOMMENDATION TO:

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