



PATTERSON

Father Joseph N. Patterson Foundation

P.O. Box 25407
Tempe, Arizona 85285

(480) 838-8777

The Father Joseph N. Patterson Foundation was established by Father Joseph N. Patterson to assist deserving young men and women attain their educational goals. Scholarships are distributed once each year. A Foundation committee reviews applications and makes recommendations to the Board of Directors for approval.

SCHOLARSHIP CRITERIA:

1. Scholarship (Minimum grade point average: 2.8 on a 4.0 scale)
2. Evidence of Financial Need
3. Demonstration of Leadership and Community Service

APPLICATION PACKAGE: PLEASE READ CAREFULLY – YOUR APPLICATION MUST INCLUDE ALL OF THE FOLLOWING OR IT WILL NOT BE CONSIDERED.

PLEASE USE THIS CHECKLIST TO MAKE SURE YOUR APPLICATION IS COMPLETE:

- Completed "Scholarship Application Form" (attached). APPLICATION MUST BE SIGNED.
- Personal cover letter from you (the student), telling us about yourself, your educational and career goals.
- Make a separate List of extracurricular activities and honors (see Item VI for details).
- One (1) letter of recommendation from your school principal, counselor, registrar, dean or major professor. (MUST BE FROM CURRENT YEAR)
- Two (2) letters of recommendation from people who know you personally (other than a parent) . (MUST BE FROM CURRENT YEAR)
- Certified school report card or transcript (high school, college, etc., as applicable).

ALL APPLICATIONS MUST BE POSTMARKED NO LATER THAN MIDNIGHT, JUNE 15TH.

It is NOT necessary to send by certified mail; regular mail is sufficient.

MAIL COMPLETED APPLICATION PACKET TO:

Father Joseph N. Patterson Foundation
PO Box 25407
Tempe AZ 85285

Recipients are usually notified by July 31.
The scholarship funds are sent DIRECTLY to the recipient's school prior to the beginning of the applicable school year.
Non-recipients will also be notified.

FATHER JOSEPH N. PATTERSON FOUNDATION SCHOLARSHIP APPLICATION FORM

I. STUDENT'S PERSONAL INFORMATION

Name: _____
 Street Address: _____
 City & State: _____ Zip: _____
 Phone: Home () _____ Work () _____
 Email address: _____
 Birth Date: _____ Student Soc. Sec. No.:* _____

** Student must have a social security number to receive scholarship.
 If student is not a U.S. citizen, a work or student visa must be provided.*

II. ACADEMIC INFORMATION

Name of School you plan to attend this fall: _____
 School's mailing address: _____
 (City) _____ (State) _____ (Zip) _____
 Class you will be entering: [] Freshman [] Sophomore [] Junior [] Senior

Current High School Students ONLY:

High School Attending: _____
 Cumulative grade point average: _____
 Rank in class/class size: _____ ACT/SAT Score (College applicants): _____

Current College Students ONLY:

Previous/Current College Attended: (Name, City, State) _____
 Dates Attended: _____ Hours/Credits Completed: _____
 Cumulative grade point average: _____

III. FINANCIAL INFORMATION

INCOME:
 Annual income of applicant \$ _____
 Annual income of Father/Stepfather/Guardian..... \$ _____
 Annual Income of Mother/Stepmother/Guardian..... \$ _____
 Total Annual Income \$ _____

Number of people dependent on this income for their livelihood: _____
 Ages of Dependents: _____

EXPENSES:

Annual Expenses:

Applicant

Parents/Step-parents/Guardians

Housing:	\$ _____	\$ _____
Utilities:	\$ _____	\$ _____
Food/Clothing:	\$ _____	\$ _____
Insurance:	\$ _____	\$ _____
Medical:	\$ _____	\$ _____
Auto:	\$ _____	\$ _____
Miscellaneous:	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____

PLEASE EXPLAIN INCOME/EXPENSE VARIANCE, IF APPLICABLE. (Because the Joseph N. Patterson Foundation Scholarship is partly based on financial need, please provide whatever information you feel would assist the Foundation Committee in determining your true and accurate financial situation. (If additional space is needed, please attach your statement and write "see attached" in the space provided below.)

If applicant is dependent upon financial support, complete Columns 1 and 2 below.
 If applicant is independent of parent financial support, complete Column 2 only.

ASSETS:	#1 Parent Assets	#2 Applicant Assets
Cash on Hand, in banks, S & Ls, credit unions	\$ _____	\$ _____
Stocks and bonds, etc.	\$ _____	\$ _____
Value of real estate	\$ _____	\$ _____
Value of autos	\$ _____	\$ _____
Value of other possessions	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____

LIABILITIES:

Owed on Real Estate	\$ _____	\$ _____
Owed on Auto	\$ _____	\$ _____
Other	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____

P L E A S E D O N O T S E N D T A X R E T U R N S !

IV. USE OF SCHOLARSHIP FUNDS

Tuition.....	\$ _____
Books & Supplies.....	\$ _____
Board & Room	\$ _____
Transportation	\$ _____
Personal Expense	\$ _____
TOTAL.....	\$ _____

V. OTHER TYPES OF FINANCIAL ASSISTANCE YOU WILL RECEIVE (If known)

Total Scholarships	\$ _____
Total Grants/Gifts	\$ _____
Total Loans.....	\$ _____
TOTAL.....	\$ _____

VI. EXTRACURRICULAR ACTIVITIES AND HONORS

ATTACH A **SEPARATE** LIST OF EXTRACURRICULAR ACTIVITIES you have pursued, including any of the following (as examples):

- Work experiences, social service, church or community activities
- Student government or other leadership positions held
- Clubs, athletics, music, art, speech, dramatics, publications, literary groups

Define the extent of your role and describe your responsibilities for each group or activity and include the dates you were involved. Also, list and describe any honors or awards received to date. (Please do not include copies of awards; just list them.)

VII. APPLICANT'S CERTIFICATION

All the information provided is complete and accurate to the best of my knowledge. I further certify that I will be enrolled as a student hereinabove for the upcoming academic year. Should I receive the Foundation Award, I will use it toward expenses related to my high school or college attendance, as applicable. I also understand that I must notify the Foundation of any changes in my enrollment status. Change in status may result in the cancellation of any awards provided.

I also acknowledge that it is my responsibility to submit a complete application to the Foundation and comply with all deadlines.

In addition, I understand that should I receive the award, there is no guarantee of renewal. I must reapply and be re-evaluated for an award each year. I hereby certify

that I have read the application information and instructions and that I understand and accept all specified conditions.

I understand that the scholarships are awarded at the discretion of the Foundation Committee and I give the Committee permission to contact my school(s) for verification of the information herein provided. Falsification of information may result in termination of any scholarship granted. Failure to sign the certificate may result in ineligibility. All application materials shall become the property of the Foundation.

Signature of Applicant

Date

Signature of Parent or Guardian
Of Dependent Applicant

Date

Please refer to the checklist on the application's cover sheet to make sure you have all the information required for a complete application.