NEW APPLICANTS

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
4. High School and College (undergraduate) Student. (Scholarships not available for grade school or graduate students.)

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 or peer). May include an employer, supervisor or family friend. (MUST BE FROM CURRENT YEAR.)
[ ] Certified school report card or transcript (which includes the Spring Semester) (high school, college, etc., as applicable).

ALL APPLICATIONS MUST BE POSTMARKED NO LATER THAN MIDNIGHT, JUNE 7TH.

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 15. 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 Dependent(s): ____________________________
### EXPENSES:

<table>
<thead>
<tr>
<th></th>
<th>Applicant</th>
<th>Parents/Step-parents/Guardians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Utilities</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Food/Clothing</td>
<td>$</td>
<td>$</td>
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<tr>
<td>Insurance</td>
<td>$</td>
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<tr>
<td>Medical</td>
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<tr>
<td>Auto</td>
<td>$</td>
<td>$</td>
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<tr>
<td>Miscellaneous</td>
<td>$</td>
<td>$</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>$</td>
<td>$</td>
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</tbody>
</table>

**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:

<table>
<thead>
<tr>
<th></th>
<th>#1 Parent Assets</th>
<th>#2 Applicant Assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash on Hand, in banks,</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>S &amp; Ls, credit unions</td>
<td></td>
<td></td>
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<tr>
<td>Stocks and bonds, etc.</td>
<td>$</td>
<td>$</td>
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<tr>
<td>Value of real estate</td>
<td>$</td>
<td>$</td>
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<tr>
<td>Value of autos</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Value of other possessions</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

### LIABILITIES:

<table>
<thead>
<tr>
<th></th>
<th>#1 Parent Assets</th>
<th>#2 Applicant Assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owed on Real Estate</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Owed on Auto</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

**PLEASE DO NOT SEND TAX RETURNS UNLESS REQUESTED.**
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                  Date
Of Dependent Applicant

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