

2012-2013

ROSINA PATTERSON MEMORIAL SCHOLARSHIP APPLICATION

Name of Student _____ Date _____
Last First Middle Initial

Street Address (no POB) _____ City _____ State _____ Zip _____

Home Phone _____ Cell Number _____

Email: _____

Male Female Date of Birth (Month/Day/Year) _____ Current Grade Level _____

School Presently Attending _____

Number of Children in Home _____ Parish/Church _____

Have you received this scholarship in previous year?

Yes: When? _____ Amount Received? _____ No

List any financial assistance currently receiving: _____

Recommendations – Two recommendations are required as described below:

School Recommendation - One (1) Recommendation Form (Page 3) from staff member at current school

Name: _____

Other Adult Recommendation - One (1) Recommendation Form (Page 3) from other adult such as pastor, minister, rabbi, youth director, employer, scout leader, etc. No relatives can be used as a reference

Name: _____

PARENT/GUARDIAN INFORMATION AND AUTHORIZATION

Mother/Guardian		Father/Guardian	
Name		Name	
Home Number		Home Number	
Work Number		Work Number	
Cell Number		Cell Number	
Email Address		Email Address	
Occupation		Occupation	
Company		Company	
Income		Income	

I authorize the Sisters of St. Joseph to photograph and/or videotape my child and use the photographs/videos for educational or promotional purposes. The photographs/video may not be used for profit without my expressed permission. I understand that I or my child will not be paid or rewarded for providing this authorization.

I understand that a social function may be held to honor students who receive scholarships and that transportation to the event venue may be required by me or in the event that transportation is provided, I hereby give my permission for my child to be transported to the event.

Parent/Guardian Signature _____ Date _____

2012-2013

ROSINA PATTERSON MEMORIAL SCHOLARSHIP

APPLICATION INSTRUCTIONS

Complete application must include:

- Application** (Page 1)
- Parent/Guardian Information and Authorization** (Page 1)
- Financial Information** - Submit the following:
 - 1040 and W2 forms (most recent year required) for parent(s)/guardian(s) in which the student resides
 - Only include need copies of first two pages of W2
 - Mark out social security numbers and bank information
- Brief Autobiography** – *must be written by student* - (approximately 100 words) including, but not limited to:
 - Activities, service or volunteer projects
 - Awards and honors
 - Why it is important for you to get this scholarship
- Individual Picture**
 - Wallet size school picture preferred, others will be accepted. **Put name on back of photo**
 - Electronic photo can be emailed to sissyhorn@ssjfl.org. Save file using First Name Last Name of student. Subject line of email should read: Scholarship Photo.
- Two (2) Recommendation forms** (Page 3)
 - One (1) Recommendation Form from staff member at current school
 - One (1) Recommendation Form from other adult such as pastor, minister, rabbi, youth director, employer, scout leader, etc. No relatives can be used as a reference

Deadline: Friday, March 9, 2012 by 3:30 p.m.

Only complete applications with items listed above will be accepted.

Mail to: Rosina Patterson Memorial Scholarship Selection Committee, c/o of Sissy Horn, Director of Mission Advancement, P.O. Box 3506, St. Augustine, Florida 32085-3506

Deliver to: Rosina Patterson Memorial Scholarship Selection Committee, c/o of Sissy Horn, Director of Mission Advancement, 241 St. George Street, St. Augustine, Florida 32084

2012-2013

ROSINA PATTERSON MEMORIAL SCHOLARSHIP RECOMMENDATION

Rosina Patterson was a student of St. Joseph Academy during the period in which the school was owned and operated by the Sisters of St. Joseph of St. Augustine. Ms. Patterson held in high regard the education that she received at St. Joseph Academy and recognized the influence of the Sisters who taught her in the early years of her life. Upon her death in 1992, she established the **Rosina Patterson Memorial Scholarship Fund** to provide grants to students for attendance at St. Joseph Academy.

Applicants are required to submit two (2) recommendations for scholarship consideration. Your completion of this recommendation form is greatly appreciated. *You can not be related to the applicant.*

Recommendation for (applicant): _____

Recommendation from:

Name: _____ Date: _____

Phone: Work _____ Cell _____ Home _____

Email: _____

Relation to Applicant: Teacher Pastor, Minister, Rabbi Youth Director Scout Leader Employer
Other, specify: _____

How long have you known this applicant? _____

Please tell us why you think this student would be a good scholarship candidate.

Please mail or email completed recommendation (Deadline March 9, 2012 by 3:30 pm) to:

Rosina Patterson Memorial Scholarship Committee, c/o Sissy Horn, Director of Mission Advancement, P. O. Box 3506, St. Augustine, Florida 32085-3506 **OR** sissyhorn@ssjfl.org.

ROSINA PATTERSON MEMORIAL SCHOLARSHIP FUND

HISTORY:

Rosina Patterson was a student of St. Joseph Academy during the period in which the school was owned and operated by the Congregation of the Sisters of St. Joseph. Rosina Patterson held in high regard the education that she received under the influence of the Sisters who taught her in the early years of her life. Rosina Patterson was born on October 29, 1892 and died on February 28, 1992.

THE ROSINA PATTERSON MEMORIAL SCHOLARSHIP FUND:

A fund established in 1992 providing grants to needy students for attendance at St. Joseph Academy, 155 State Road 207, St. Augustine, Florida.

TITLE OF FUND:

Rosina Patterson Memorial Scholarship Fund

AREA:

St. Joseph Academy, St. Augustine, Florida

LEVEL OF EDUCATION FOR WHICH AWARD IS GRANTED:

High School

NUMBER; AMOUNT; TYPE OF AWARD:

Unspecified number and amount of scholarship. Scholarship awards are based on the fund return on investment for the previous year. The average award amount is around \$350 per student. Each recipient is negotiated individually. Renewable.

ELIGIBILITY:

Students who are currently attending St. Joseph Academy or will be entering as a freshman for the next funding period. Eligibility is also based on character and need.

METHOD OF DISBURSEMENT:

Scholarship paid directly to St. Joseph Academy for tuition, textbooks and/or course material expenditures.

APPLICATION PERIOD:

Awards are made annually. Deadline for submission indicated on application.

MAIL TO:

Rosina Patterson Memorial Scholarship Fund
Sisters of St. Joseph of St. Augustine
Mission Advancement Office
Post Office Box 3506
St. Augustine, Florida 32085-3506

-OR-

DELIVER TO:

Rosina Patterson Memorial Scholarship Fund
Sisters of St. Joseph of St. Augustine
Mission Advancement Office
241 St. George Street
St. Augustine, Florida 32084

-OR-

EMAIL TO: sissyhorn@ssjfl.org

AWARD NOTIFICATION AND DISBURSEMENT:

Applicants will be notified via U.S. mail of scholarship acceptance within two weeks after above deadline. Funds will be directly distributed to St. Joseph Academy for tuition, textbooks and/or course material expenditures.