

## Daughters of Isabella Scholarship

St. Joseph Circle #650  
North Canaan, Connecticut

### Qualifications:

1. First consideration will be given to a practicing Catholic having received their Confirmation sacrament and who is related to a current member of one of the current membership of St. Joseph Church Circle #650, Daughters of Isabella.
2. Applicants must be planning to attend an accredited college or approved secondary school.
3. This award is based on scholastic achievement, good citizenship as evidenced by participation in school, church, and community activities, leadership potential, and on financial need not necessarily in that order.
4. Three letters of recommendation are required from the following:
  - a. from the applicant, explaining his or her future plans and extracurricular activities (school, church, community).
  - b. from a faculty member of the school now attending.
  - c. from a person of good standing in the parish community.

### Funds Available:

1. The scholarship award is \$1000 and will be made available at the beginning of the second semester of the school year after successful completion of the first semester is verified.

### How to Apply:

1. Application forms may be obtained in the Parish Office of St. Martin of Tours in North Canaan, CT.
2. Application is to be prepared completely and returned to: Daughters of Isabella, St. Joseph Circle #650, Attn: Scholarship Committee, Box 897, Canaan, CT 06018.
3. The Guidance Office of the school now attending is to fill out page 3 of the application.

### Deadline: May 15, 2023

For further information contact the Regent of the Daughters of Isabella, Circle #650, Christina Allyn, 860-318-5803 (call or text).

# SCHOLARSHIP APPLICATION

Daughters of Isabella, Circle #650, N. Canaan, CT

\*Please Note: Consideration will be given to students from any of the parishes of our present members of St. Joseph Circle #650 Daughters of Isabella.

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First                      Middle                      Last Name                      Phone #

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Father's Name    Occupation

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Mother's Name    Occupation

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School Currently Attending                      School Attending Next Year

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Current Year in School

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Career Objective    Course of Study

Cost of Room and Board \$ \_\_\_\_\_

Cost of Tuition \$ \_\_\_\_\_

Cost of Books and Fees \$ \_\_\_\_\_

Total Cost \$ \_\_\_\_\_

Funds Available (List Sources): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Scholarships Received Last Year (Source & Amount) if applicable:

\_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_ use the reverse side if necessary.

I hereby certify that I am a practicing Catholic and a member of \_\_\_\_\_ Parish, pursuing higher education and that I know of no consideration which would bar me from participation in the Daughters of Isabella Circle #650 Scholarship Fund, and that it is my purpose to attend the institution indicated on this application and to maintain to the best of my ability satisfactory standards of scholarship as long as I am a student. I understand that any scholarship, which I may receive, must be paid to the school of my choice by me as payment toward my tuition and/or other school costs.

Have you received the Sacrament of Confirmation?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

**To be completed by high school Guidance Office:**

**Name of applicant:** \_\_\_\_\_

**Name of high school:** \_\_\_\_\_

**Scholarship Average:** \_\_\_\_\_

**Rank Number:** \_\_\_\_\_ **out of :** \_\_\_\_\_

**SAT-M** \_\_\_\_\_

**SAT-V** \_\_\_\_\_

**Approved by School Official:**

**Name (please print):** \_\_\_\_\_

**(signature):** \_\_\_\_\_

**Title:** \_\_\_\_\_

## General Information

Please indicate the amount of tuition, room and board parents will be able to pay for the applicant:\_\_\_\_\_.

Please list all additional dependents who are currently in school or

college: Name:

Age:

School:

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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Application Checklist:

\_\_\_\_A personal letter explaining career objectives and extracurricular activities.

\_\_\_\_A letter of recommendation from your pastor or a member in good standing in the parish community.

\_\_\_\_A letter of recommendation from a faculty member of the school now attending.

(You may also include any information you feel might be helpful to the scholarship committee)

\_\_\_\_High School student applicants are requested to have pg. 3 filled in by the proper school official.

\*College student applicants are requested to send a copy of their latest transcript.

Please return a complete application packet by **May 15th, 2023**.

Recipient will be notified by June 10, 2023.

**Please return to: Daughters of Isabella #650, Attn: Scholarship Committee,  
PO Box 897, Canaan, CT 06018**