



JSERRA CATHOLIC HIGH SCHOOL

FAITH. INTELLECT. CHARACTER.

SERRA SCHOLARSHIP APPLICATION FORM

(Note: Completion of the Financial Grant Application is also required.)

Student Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

GPA _____ Current Grade _____ School Currently Attending _____

Describe how you have demonstrated the love of learning. Please include any awards or honors you have received.

Parent Section: Please briefly explain why you have a need of financial assistance.

Please attach any supporting documents that verify your student's gifts/talents to qualify for this scholarship.

Please return your completed form via [email](#).