The Timothy Horny Nouvel Baseball Scholarship Application

Last name:	First name:	
Email:	Phone number:	
be attending an accredited institution of hig	ting Nouvel Catholic Central senior who will her learning iic ability who participated in baseball for all	
\square I have reviewed the eligibly requirements related to this scholarship and am confident that I meet any/all necessary criteria.		
\square I acknowledge that by submitting this application, I allow the selection committee to access relevant records retained by any Catholic parish, Catholic school and/or public school in order to determine my eligibility for this scholarship. This may also include contacting appropriate parties to confirm information supplied by the candidate.		
\square If selected as the scholarship recipient, I acknowledge and give permission for the Catholic Community Foundation of Mid-Michigan to use my name and/or image in media announcements related to this award.		
Year of graduation from Nouvel Catholic Central High School:		
The scholarship is intended for a student of good character and academic ability who participated in baseball for all four years of high school.		
Cumulative grade point average: (Submit an official transcript with application)	on)	
Level of participation in the baseball progra 9 th grade:	am: 10 th grade:	
11 th grade:	12 th grade:	

Applicants are welcome, but not required to, provide a statement/information that they feel would help the committee identify a recipient based on the criteria of the award.

Applicants are not required but may submit a letter(s) of support/recommendation from members of school / parish staff who are able to affirm and speak to the applicant's eligibility based on the criteria of the scholarship. Related documents must be submitted with the completed application.

Please list the any items that you have submitted in addition to the application.

onege(s) you applied to 7 plan to attend.	
I affirm that all information contained within and/or as part of this application is accurate	and
ue to the best of my knowledge.	

A completed application and related documents must be submitted in a single document/attachment to:

- Electronically: scholarships@dioceseofsaginaw.org
 (Please list only the name of the scholarship in the subject line of the email)
- Mail: Diocese of Saginaw
 Attention Office of Catholic Schools
 (CCFMM Scholarship)
 5800 Weiss St.
 Saginaw, MI 48603

College(s) you applied to / plan to attend:

Applications received after the deadline will not be accepted.

The Catholic Community Foundation of Mid-Michigan, the Office of Catholic Schools and any related parties are not responsible for any format/technology errors that may result in an application not being reviewed.

