

Catholic COMMUNITY FOUNDATION OF MID-MICHIGAN

The Rod Luplow Memorial Scholarship Application

Last name:

First name:

Email:

Phone number:

Eligibility:

- For a graduating (four year) Nouvel Catholic Central High Schools student who is admitted and enrolled in an accredited college/university of his/her choice
- Participated in Nouvel's football program
- Can demonstrate financial need
- Must have a minimum grade point average of 3 .0 throughout their four years of high school at Nouvel
- Possess characteristics of leadership, character, and determination.

I have reviewed the eligibly requirements related to this scholarship and am confident that I meet any/all necessary criteria.

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.

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:

Cumulative grade point average:
(Submit an official transcript with application)

Select the grade levels during which you participated in Nouvel's football program.

7th grade

8th grade

9th grade

11th grade

10th grade

12th grade

The presence and display of leadership, character, and determination in applicants will also be evaluated. Applicants are welcome to submit a statement that would help the committee better understand how the he/she has meet this aspect of eligibility.

Financial need is a factor in determining a recipient. Applicants are welcome to submit a statement that would help the committee better understand the level of need.

Applicants are strongly recommended to submit letters 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.

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

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

I affirm that all information contained within and/or as part of this application is accurate and true 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

Please list only the name of the scholarship in the subject line of the email.

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.

