

**Scholarships Awarded for 2010-2011 Academic Year.** Please give name of Scholarship Program, amounts of award and time frame for distribution.

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Volunteer Programs, internships, extracurricular activities.

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Please submit the following along with your application.

- 2009 Income Tax
- High School Transcript (if still in High School) (Original)
- College Transcript (Original)

**Please submit this completed application to:**

Holy Rosary Catholic School  
Advancement Office  
1043 Lake Avenue  
Detroit Lakes, MN 56501

For more information call:  
Terri Paskey  
218-847-5306

# The Stary Family Scholarship

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City/Town/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone \_\_\_\_\_

## EDUCATION HISTORY:

**Elementary School:** \_\_\_\_\_

Address: \_\_\_\_\_

City/Town/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Years Attended: \_\_\_\_\_ Grades: \_\_\_\_\_

**High School:** \_\_\_\_\_

Address: \_\_\_\_\_

City/Town/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Year Graduated: \_\_\_\_\_

Junior Year GPA: \_\_\_\_\_ Senior Year GPA: \_\_\_\_\_

**College:** \_\_\_\_\_

Address: \_\_\_\_\_

City/Town/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Years Attended: \_\_\_\_\_

Credits completed most current year: \_\_\_\_\_

(Designate as Quarter or Semester Credits)

GPA Most Current year: \_\_\_\_\_ Degree/Program: \_\_\_\_\_

Estimated Graduation Date: \_\_\_\_\_