



OBLATE SCHOOL OF THEOLOGY

THE GORDON FAMILY SCHOLARSHIP

The **Gordon Family Scholarship** is an annual scholarship granted to a student accepted into any degree program at Oblate School of Theology. This scholarship is competitive and based on pastoral and academic potential. Determination is made by the Scholarship Committee. One scholarship will be awarded per academic year in an amount up to \$500.

Qualifications:

1. The student must meet the admission requirements for acceptance into Oblate School of Theology.
2. The student must meet the admission requirements for their particular degree program.
3. The student must have plans to be in full-time ministry or presently in full-time ministry.

Priority will be given to Roman Catholics or those engaged in ministry at settings sponsored by the Roman Catholic Church. Special consideration will also be given to those ministering in settings which are underserved, serve the poor and/or the abandoned. Other applicants will be considered. The decision will be made by the OST Scholarship Committee.

Applications may be obtained from the Finance Office or online from the OST Website and must be submitted to the Finance Office. Only one application is required per academic year; however, funds will not be awarded retroactively if the application is not submitted prior to the deadlines. The deadlines are as follows: August 1st for consideration for the academic year, January 2nd for consideration for the spring and summer semesters, and May 1st for consideration for the summer semester. Applicants must have applied to OST and to a degree program in order for the scholarship application to be considered.



OBLATE SCHOOL OF THEOLOGY

Gordon Family Scholarship Application

Date of Application _____

Name: _____

Address: _____

Email: _____ Zip: _____ Phone: _____

Date of Birth: _____ Religion: _____

Marital Status: _____ # of Dependants: _____

Are you presently involved in full-time ministry? Yes No

If yes, where?

If no, when do you plan to enter full-time ministry and where?

What is your main area of interest in ministry?

What is your undergraduate degree? _____ GPA _____

Have you applied for admission to the Oblate School of Theology?

Yes No

On a separate paper, please tell us about your ministry and the community it serves. Please limit this section to two typed double-spaced pages.

FINANCIAL INFORMATION

Semester(s) for which you are requesting aid: _____

How did you learn about this scholarship? _____

Where else have you sought financial aid? _____

Do you have outstanding Student Loans? _____

If yes, from Whom: (Name, City, State of Lender) _____

Are you presently employed? _____

If yes, provide Employer's Name and Address: _____

Is your spouse employed? _____

If yes, provide Employer's Name and Address: _____

Please explain reason for your request: _____

Have you discussed your Theological Education and your need for Financial Assistance with your employer/parish/sponsor? Yes No

Are they willing to contribute financially towards your education? Yes No

If no, please explain _____

The information you provide will be treated in a confidential manner and will be made available only to the Finance Office and the Scholarship Committee. **Please attach all pages of most recently filed form 1040, if applicable.**

| Income (A) (most recent) | | Personal Expenses (B) (most recent) | |
|--|-------------------|--|-----------------|
| Annual Gross Income: | | Monthly Expense: | |
| Yours | \$ | Housing | \$ |
| Spouse | | Utilities | |
| Other | | Phone | |
| Child Support | | Car Payment | |
| | | Car Insurance | |
| Financial Assistance for Education from: | | Medical, Dental, Life, etc. | |
| Parents | \$ | Food | |
| Employer | | Insurance | |
| Grants | | Other (please itemize) | |
| Loans | | | |
| Archdiocesan Vouchers | | | |
| Other (please itemize) | | | |
| | | Total Monthly Expense: | \$ |
| | | | X 12 |
| Total Annual Income (A): | \$ | Total Annual Expense (B): | \$ |
| | | | |
| Education Expense: | (Semester) | Education Expense (C): | (Annual) |
| OST Tuition (___ cr hrs X tuition rate) | \$ | OST Tuition (___ cr hrs X tuition rate) | \$ |
| Fees | | Fees | |
| Transportation | | Transportation | |
| Books | | Books | |
| Other (please itemize) | | Other (please itemize) | |
| Total Semester Expense | \$ | Total Annual Expense (C) | \$ |

| | | |
|--|-----|----|
| Total Annual Income | (A) | \$ |
| Less Annual Personal Expense | (B) | |
| Less Annual Education Expense | (C) | |
| Net Income | | \$ |
| Amount of Scholarship Requested* | | \$ |
| * OST reserves the right to determine how much and who will receive scholarship funds. | | |

All information requested by and/or submitted with this application will be held in the strictest of confidence; however, by signing this form the applicant grants permission for the Finance Office and Scholarship Committee to view pertinent financial and academic records.

Applicant Signature

Date