

# APPLICATION

For the Marianist Urban Students Program (MUSP Grant)



First Name of Applicant:

Last Name of Applicant:

## Procedure for Consideration:

1. Put name on top of this page in the spaces provided.
2. Complete the attached pages.
3. Attach your student essay to this application.
4. Bring all documents to your principal by:

**FRIDAY NOVEMBER 10<sup>th</sup>, 2017**

5. Students are encouraged to take the Villa Angela-St. Joseph High School Entrance Examination on Saturday October 7<sup>th</sup>, Saturday October 21<sup>st</sup>, or Saturday November 4<sup>th</sup> at 9am **You must register for this exam.** Go to [www.vasj.com](http://www.vasj.com) or contact the Department of Admissions at [kwatrobki@vasj.com](mailto:kwatrobki@vasj.com) 216-481-8414x284 if you have any questions regarding the Entrance Examination. Students must ultimately complete one of the entrance exams to be considered for the program.
6. All students who satisfactorily complete the above will be interviewed.
7. Follow up interviews may be requested.
8. Upon completion of the interviews of MUSP Candidates the MUSP Board will select the 6 members of the MUSP class of 2022!

**Questions regarding the Marianist Urban Students Program should be directed to:**

Tim Neary, Director of MUSP

[tneary@vasj.com](mailto:tneary@vasj.com)

216-481-8414x216



**PART ONE: Student Essay**

- On a separate sheet of paper write or type 100 to 150 words explaining: ***“Why I should be chosen for the Marianist Urban Student Program.”*** Attach your essay to this application packet before you submit it to your principal.
- Some ideas you may want to express...
  - o *What is your goal in life? What do you want to be?*
  - o *How do you perceive that you are a leader?*
  - o *What do you understand by the word Marianist?*
  - o *What is your relationship with God like? What about religion?*
  - o *Any other ideas you would like to share.*
- Remember, you are writing an essay to receive a significant scholarship and place in a limited program.

**PART TWO: Student Information**

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:
GENDER: M      F	BIRTHDATE: ____/____/____	PHONE: (____) _____ - _____  **This number will be used as the primary contact by MUSP.
ADDRESS: Street: _____ Apt #: _____ City: _____, Ohio Zip Code: _____		
SCHOOL CURRENTLY BEING ATTENDED: _____ St. Agatha-Aloysius _____ St. Jerome _____ St. Thomas Aquinas _____ St. Francis _____ St. Adalbert	How long have you been at this school? _____ Name of your parish/church? _____ Pastor/ Minsters name: _____ Contact number for Pastor/Minister: _____ Your religion? _____	
<b>***Be sure all fields are filled out neatly and correctly!</b>		



**PART THREE: Household Information**

**MOTHER**

LAST NAME:	FIRST NAME:
LIVING AT HOME WITH STUDENT: <div style="display: flex; justify-content: space-around;"> <span>YES</span> <span>NO</span> </div>	HOME PHONE: (    )    -    _____
PLACE OF EMPLOYMENT:	OCCUPATION:
	WORK PHONE: (    )    -    _____
EDUCATION COMPLETED:	

**FATHER:**

LAST NAME:	FIRST NAME:
LIVING AT HOME WITH STUDENT: <div style="display: flex; justify-content: space-around;"> <span>YES</span> <span>NO</span> </div>	HOME PHONE: (    )    -    _____
PLACE OF EMPLOYMENT:	OCCUPATION:
	WORK PHONE: (    )    -    _____
EDUCATION COMPLETED:	

*Please list all living at home with student and guardian(s): siblings, aunts, uncles, grandparents, etc...*

<u>NAME:</u>	<u>RELATIONSHIP:</u>	<u>AGE:</u>	<u>SCHOOL ATTENDING:</u>	<u>TUITION + FEES:</u>
				\$
				\$
				\$
				\$
				\$
				\$
Total Tuition + Fees Paid this Current Year for everyone (elementary, college, etc..) → Enter this number on the last page #7				\$

**PART THREE: Household Information (continued)**

Who is the Head(s) of the Household? \_\_\_\_\_

If different than the mother or the father please list:

LAST NAME:	FIRST NAME:	
HOME PHONE: ( ) _____ - _____		
PLACE OF EMPLOYMENT:	OCCUPATION:	WORK PHONE: ( ) _____ - _____
EDUCATION COMPLETED:		

**PARENT RELEASE FORM:**

***I give my child's present school and to Villa Angela-St. Joseph High School the permission to release to the Marianist Urban Students Program any information deemed to be important to the education and welfare of my child.***

Signature:

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Date: \_\_\_\_\_

# Special Family Income Report

## For MUSP Grant

Approximate Household Income before assistance: \$ \_\_\_\_\_

Is the child a current recipient of the Cleveland Scholarship Voucher Program or Ohio Ed Choice Program?    Y    N

Does the child applying to MUSP receive free or reduced lunch?    Y    N

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IN SIGNING THIS APPLICATION I CERTIFY THAT THE ANSWERS IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

**PARENT/GUARDIAN SIGNATURE:**

\_\_\_\_\_ Date: \_\_\_\_\_

**STUDENT SIGNATURE:**

\_\_\_\_\_ Date: \_\_\_\_\_

*please note this application must be signed by your principal. She/He will forward it to the MUSP Board for Consideration.*

**PRINCIPAL SIGNATURE:**

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