



SCHOOL OF
**PARISH LEADERSHIP
& EVANGELIZATION**

University of
Saint Mary of the Lake

**APPLICATION FOR SCHOLARSHIPS AND INSTITUTIONAL FINANCIAL AID
2024-2025**

Date: _____

I. PERSONAL INFORMATION:

Name: _____

Address: _____

Phone: _____ Email: _____

Diocese and Parish: _____

Student Identification Number (SONIS): _____

II. WHICH PROGRAM ARE YOU IN:

DEACON FORMATION:

GRADUATE PROGRAM (MAPS, MAL, etc):

LAY MINISTRY:

III. WRITE A BRIEF ESSAY THAT ADDRESSES THE FOLLOWING QUESTIONS:

- a) Discuss the reasons you are requesting support.
- b) What are the implications if you are not able to receive support?
- c) How will this program Help you to better carry out work in your parish or other ministerial context?

NOTE: THE UNIVERSITY OF SAINT MARY OF THE LAKE WILL CONSIDER THE FUNDS AVAILABLE AND MAKE FINANCIAL AID DECISIONS BASED ON STUDENT NEED AND POTENTIAL FOR SUCCESS IN THE PROGRAM AND BEYOND. **THE DEADLINE TO APPLY FOR SCHOLARSHIPS IS 8/7/24.**

Please submit your scholarship application form to admissions@usml.edu