ARCHDIOCESE OF SANTA FE
NATIVE AMERICAN MINISTRY
ST. KATERI TEKAKWITHA

SCHOLARSHIP APPLICATION
SCHOOL YEAR 2023-2024

NAME OF APPLICANT: __________________________

NAME OF SCHOOL: __________________________

SUBMISSION DATE: __________________________

Submission Deadline: Friday June 16, 2023
ST. KATERI TEKAKWITHA
SCHOLARSHIP INFORMATION

The St. Kateri Tekakwitha Scholarship Program provides scholarships annually to deserving Native American students attending or soon to be attending Catholic school within the Archdiocese of Santa Fe. The Native American Scholarship Committee annually determines the number and amount of scholarships given as funding warrants. Scholarship amounts are generally received at the beginning of the school year by the appropriate Catholic School of which the student attends and is applied to tuition and/or registration fees.

ELIGIBILITY CRITERIA
• Native American student, Catholic or non-Catholic, in grades kindergarten to twelve
• Enrolled or will enroll in one of the Archdiocese of Santa Fe Catholic Schools
• Plans to attend school for the entire academic year beginning in the fall
• Must have a C+ or better grade average
• Valid Tribal ID
• A completed application through the Grant & Aid Assessment in FACTS is REQUIRED for the school year 2023-2024

FACTS GRANT & AID ASSESSMENT
FACTS is an independent, third-party company that works with schools across the country to help evaluate family financial needs, allowing schools to award aid with confidence. The Archdiocesan Catholic Schools Office receives a confidential report outlining your financial situation based on the information obtained in your application and supporting tax documents. The analysis completed by FACTS Grant & Aid Assessment serves as a recommendation only.
CATHOLIC SCHOOL CERTIFICATION FORM
The certification form confirms that the applicant will be or is a student at the Catholic school and has an overall grade average of C+ or better. The applicant must provide the certification form to the school administrator to complete and sign.

SCHOLARSHIP CHECK-LIST
All St. Kateri Tekakwitha Scholarship Applications must include the following:
  o FACTS Grant & Aid Assessment Application (completed via www.factstuitionaid.com)
  o Scholarship Application Form (pg. 4)
  o Level of Need and Unique Circumstance Form (pg.5)
  o Certification Form (pg.6)

**SPECIAL NOTE:** Incomplete applications will not be considered for the St. Kateri Tekakwitha Scholarship.

SCHOLARSHIP APPLICATION
Completed applications must be received in the Native American Ministry Office by Friday, June 16, 2023, to be considered for the 2023-2024 school year. Mailed applications must be postmarked on or before Thursday, June 15, 2023. Applications may also be faxed, emailed, or dropped off at the Archdiocese of Santa Fe Catholic Center at the location mentioned below. All applications become the property of the Native American Ministry Office.

RETURN COMPLETED APPLICATION TO: Native American Ministry Office
ASF Catholic Center: 4000 St. Joseph Pl, NW
Albuquerque, NM 87120
Fax: 505-831-8146
Email: szuni@archdiosf.org

QUESTIONS?
Please contact the Native American Ministry Office at 505-831-8104
ST. KATERI TEKAKWITHA

SCHOLARSHIP APPLICATION

SCHOOL YEAR 2023-2024

NAME OF CATHOLIC SCHOOL: ________________________________

STUDENT NAME: ____________________________________________

MAILING ADDRESS: __________________________________________

CITY/STATE/ZIP: ____________________________________________

TRIBE AFFILIATION: _________________________________________

TRIBAL ID #: ______________________________________________

GRADE IN 2023-2024: ________________________________

PARENT/GUARDIAN (1): ______________________________________

ADDRESS (IF DIFFERENT FROM ABOVE): _________________________

CITY/STATE/ZIP: ____________________________________________

PHONE: ____________________________________________________

EMAIL ADDRESS (optional): _________________________________

PARENT/GUARDIAN (2): ______________________________________

ADDRESS (IF DIFFERENT FROM ABOVE): _________________________

CITY/STATE/ZIP: ____________________________________________

PHONE: ____________________________________________________

EMAIL ADDRESS (optional): _________________________________

ARE YOU RECEIVING OTHER SCHOLARSHIP ASSISTANCE? YES / NO

IF YES, EXPLAIN ____________________________________________

__________________________________________________________

__________________________________________________________
PARENT(S)/GUARDIAN(S) PLEASE DESCRIBE YOUR LEVEL OF NEED AND UNIQUE CIRCUMSTANCE(S) IN THE SPACE BELOW. PLEASE CONTINUE ON THE BACK OF THIS PAGE IF NECESSARY.

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STUDENT NAME

PARENT(S)/GUARDIAN NAME(S): (Print)

PARENT(S)/GUARDIAN(S) SIGNATURE & DATE
ST. KATERI TEKAKWITHA

SCHOLARSHIP CERTIFICATION FORM

SCHOOL YEAR 2023-2024

Note: Applicant, please give this form to the school administrator to complete and sign. Include this form with your application packet for submission.

STUDENT NAME:__________________________________________________________

I,__________________________________________________________, affirm that the above student is

Name of School Administrator

enrolled or will be enrolled at _____________________________________________

Name of Catholic School

and has an overall grade point average of C+ or better.

Comments (if necessary use back of page):

________________________________________________________________________

Signature of School Administrator                Position                Date