Simple Way Limited Partnership Scholarship Application
Mail your completed application and all supplemental materials to Simple Way Limited Partnership, 805 NW Alder St, McMin-

Mail your completed application and all supplemental materials to Simple Way Limited Partnership, 805 NW Alder St, McMinnville, OR 97128. All materials must be received before June 30 to be considered for the following academic year. See <a href="http://www.rosaryshop.com/resources.php/request/scholarship/">http://www.rosaryshop.com/resources.php/request/scholarship/</a> for questions.

	Transcripts of I Copy of SAT o One paragraph One paragraph Typed essay as If attending Ca faculty	mmendation frast four years r PSAT resul explaining w explaining y described at tholic institute have taken the	rom teacher, godparent or priest (can s (send directly from schools) ts (GRE or equivalent if going to graphy you are applying for this scholar our motivation for your course of stuttp://www.rosaryshop.com/resourcetion, a letter from the Director of the ne Oath of Fidelity or have received ion fee written to The Rosary Shop	aduate school) ship ady and school choice es.php/request/scholars Dept. of Theology stati	ing that all theology
,	Your Full Name				
	Street Address				
	City, State, Zip				
Telep	hone and email				
	_				
College/Seminary/University					
Street Address					
City, State Zip					
Registrar Telephone					
Fi	nancial Aid Offic	e Telephone			
		Web Site	http://		
	/ Minor field of s		/		
1 Annual cost of tuition					
2 Annual cost of room and board (if you will be residential)					
3	Other annual ex		· • /		
			<u> </u>		
5 Total scholarships, grants and			l gifts expected		
6	Student loans				
7	Amount you wil	ll earn throug	h work		
8 Other income you will receive to cover educational expenses					
9	•				
10 Balance (line 4 - line 9)					
ticing	Catholic. I author	rize the above	nithful representations of my financial e-named institution to discuss my financial of determining my eligibility for this	ancial aid situation and	

Date

Signature

## Letter of Recommendation

has applied for a scholarship from Simple Way Limited Partnership.
As part of his application, we require a letter of recommendation from a past teacher, godparent or priest. Please
take a few moments to describe his/her character, academic potential, faithfulness as a Catholic, and any other
information you believe is relevant to our decision. The please mail this letter to us at Simple Way Limited
Partnership Scholarship, 805 NW Alder St, McMinnville, OR 97128. You may also fax it to 503-434-5803.

## Letter of Confirmation for Catholic Institutions

ing fac publich to us a	has applied for a scholarship from Simple Way Limited Partp. As part of his application, we require a letter from the department of theology confirming that all teachedly have taken the Oath of Fidelity or have received the mandatum from the bishop (or have otherwise ly committed to faithfully teaching authentic Catholic theology). The please complete and mail this letter t Simple Way Limited Partnership Scholarship, 805 NW Alder St, McMinnville, OR 97128. It may also ed to 503-434-5803.			
	I confirm that, as of the date of signing, all teaching faculty from the department of theology have taken the Oath of Fidelity and/ or have received the mandatum from the local bishop.			
	Signature:			
	Date:			
	Printed Name:			
	Title:			
	Institution:			