

**KINNALLY-ACP SCHOLARSHIP
APPLICATION**

Thank you for your interest in the Kinnally ACP Scholarship. To be considered for the scholarship, please complete the following:

1. Complete this Application.
2. Read and complete all requirements listed in the Scholarship Application Instructions document.
3. Email all requested materials as attachments to: mpapich@antonian.org by 5:00 pm, June 30, 2026.

Student Legal Name (First)	(Last)
Today's Date	Birth date
Parent/Guardian Name	Parent/Guardian Email Address
Street Address, City, State, Zip	
Phone Number (Day)	(Cell)
Student Grade Level (for the coming school year)	GPA (from student's most recent report card)
Name of Current School	School Phone Number
Street Address, City, State, Zip	

Income Information

Annual family Income (Adjusted Gross Income on most recently filed Tax Return)

Reasons for Eligibility

In some cases, documentation of extenuating circumstances may be provided with the application. Choose any which may apply:

- Change in Employment _____
- Public Assistance (Program Name) _____
- Other Extenuating Circumstances (medical bills, another child in school, etc.) _____

By signing this application, you agree to the following:

_____ If my child is awarded a scholarship, my intention is for this student to graduate from Antonian College Preparatory High School.

_____ I agree to provide verification of household income through the FACTS application process.

Parent/Guardian Signature