



NOTRE DAME HIGH SCHOOL

Member of the Middle States Association of Colleges and Secondary Schools
3417 Church Road, Easton, PA 18045
610 868-1431 Fax 610 868-6710 www.ndcrusaders.org

Personal Data Form – Scholarships/Internships

STUDENT NAME _____ 2019-20 GRADE _____

STUDENT HOME ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PARISH _____ PASTOR _____

CURRENT GPA _____ (or general avg. if incoming freshmen; minimum requirement determined by specific scholarship)

EXTRA-CURRICULAR ACTIVITES AT ND/CURRENT SCHOOL: (CLUBS/SPORTS/ETC.):

ACTIVITIES PERFORMED WITHIN COMMUNITY:

HONORS/AWARDS/RECOGNITIONS:

EMPLOYER INFORMATION (IF APPLICABLE):

EMPLOYER _____ CITY/STATE _____ HRS/WEEK _____

PLEASE SELECT SCHOLARSHIPS/INTERNSHIPS BEING APPLIED FOR WITH THIS FORM:

_____ Christopher Meddaugh Memorial Scholarship for returning students

Student Signature _____ Parent/Guardian Signature _____ Date _____

I have reviewed this application and recommend that this candidate be considered for the above scholarship.

Principal Signature _____ Date _____