



# Billings Catholic Schools Foundation Scholarship Application

Applicant must be a registered student for the 2024-2025 school year.

All applicants must submit : \*A Completed Scholarship Application \_\_\_\_\_  
\*Most Recent Report Card or Transcript \_\_\_\_\_  
\*2 Letters of Recommendation from Non-Relatives \_\_\_\_\_

**LATE OR INCOMPLETE APPLICATIONS WILL BE DENIED**

**Mail completed applications by April 15, 2024 to: PO BOX 31158 Billings, MT 59107**

Name: \_\_\_\_\_ Grade (2024-2025 school year): \_\_\_\_\_  
Parent(s) / Guardian's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City, St. Zip: \_\_\_\_\_  
Phone : \_\_\_\_\_ Parent email address: \_\_\_\_\_  
Parish: \_\_\_\_\_ I am a \_\_\_ Returning Student \_\_\_ New Student  
\_\_\_ I am a child of a BCCHS Alumni Name: \_\_\_\_\_ Year: \_\_\_\_\_

**Please provide the following information:**

List any extra curricular activities:

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List any volunteer / community involvement:

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Why you chose to attend the Billings Catholic Schools:

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My future plans; When I grow up I would like to be ...

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Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_