

# ANCIENT ORDER of HIBERNIANS Fr. Wm. CORBY DIVISION

## JOHN F. DEVANEY SCHOLARSHIP

2016 APPLICATION



**The Fr. William Corby Division of the Ancient Order of Hibernians** is pleased to announce we are offering two (2) **\$750 John F. Devaney Scholarships**. Applicants must be registered members of St. Mary of Sorrows Parish or a son, daughter, grandchild, or spouse of a member of the AOH, Fr. Wm Corby Division. Scholarships are to be used for tuition only and are to be used to pursue post-secondary school education.

Applications and related materials must be received not later than **May 1st, 2016** at the following address to be considered.

**AOH Scholarship Committee**  
10843 Broadwater Drive  
Fairfax, VA 22032

**PRIVACY ACT ADVISORY STATEMENT**

The Privacy Act of 1974 (P.L. 93.579) requires that you be given certain information in connection with this request for data. Pursuant to the requirements of the Act, please be advised:

1. The authority for the collection of this data is Public Law 93-642.
2. Submitting the information requested is voluntary.
3. The main purpose for which the data will be used is the selection of award winners for the Ancient Order of Hibernians, John F. Devaney Scholarship.
4. Other routine uses of the data are for public affairs and press releases to news media.
5. Failure to complete the form will mean that you cannot be included among those candidates being considered for this scholarship award.

**I. BIOGRAPHICAL QUESTIONNAIRE**

The following questions are designed to collect information about your background, your interests and your plans. Answers to these questions will be used in connection with your application for this scholarship award and will be made available to the Scholarship Selection Committee.

**General Information** (Please Type or Print)

1. \_\_\_\_\_  
Applicant's Full Name: Last, First, Middle Marital Status

2. \_\_\_\_\_  
Date of birth: Month, Day, Year SSN Last Four Sex

3. \_\_\_\_\_  
Permanent Home Address and Telephone Number

4. \_\_\_\_\_  
Father, Step-father, or legal guardian: last, first, middle

5. \_\_\_\_\_  
Mother, step-mother, or legal guardian: last, first, middle

6. \_\_\_\_\_  
College or University you will attend. (include address, state, zip code, area code/telephone no.)

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**II. This section is to be completed by the Applicant.**

1. Involvement in civic and/or religious activities. Indicate the activity, date(s) of your direct, active involvement, and your role or actions.

2. Participation in extracurricular school activities. Indicate the activity, date(s) of your active participation and describe your role in the activity.

3. Describe any circumstances, if any, which you believe have impacted on your grades. Please have your school forward an Official Transcript of your high school and/or college grades to AOH Scholarship Committee, c/o Fred Walker, 10843 Broadwater Drive, Fairfax, VA, 22032.

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

**III. To be completed by the Applicant's Parent, Guardian, or Other Individual selected by the Applicant.** In the space below, please describe the Applicant's outstanding or inspirational contributions. Please limit your response to 250 words or less.

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