

FATHER JOHN V. DOYLE COMMEMORATIVE SCHOLARSHIP

I. Purpose

The Father John V. Doyle Commemorative Scholarship was created at the time of Father Doyle's Silver Anniversary as pastor of Saints John & Paul Parish and his retirement as pastor emeritus. Its purpose is to honor him, in perpetuity, as the school's founder and staunchest supporter during his many years as pastor of Saints John & Paul Church. The scholarship is awarded for one year and may be given entirely to one student or divided among any number of candidates.

II. The Scholarship Fund

A Scholarship Fund was established by the parish. This fund is held in trust by the Catholic Foundation of Rhode Island, which is a diocesan endowment fund. The interest on this fund is awarded annually as a scholarship.

III. Eligibility

The scholarship is awarded each year, in June, to a young man or woman who exhibits the qualities of being a diligent student, a conscientious Catholic, and interacts well with both the peers and adults with whom he/she comes in contact. The family circumstances of the applicant will also be considered.

Any registered parish student (public or FJVD), currently in the 6th or 7th grade is eligible to apply for the scholarship.

IV. The Scholarship Committee

Each year a Scholarship Committee will be formed and will consist of the following individuals:

- A) Pastor of Saints John and Paul Church
- B) Principal of Father John V. Doyle School
- C) Representative of the FVJD School Board
- D) Associate Pastor

The pastor and the school principal will automatically serve on the scholarship committee by virtue of their office.

The School Board representative will be chosen by the School Board.

The Assistant Pastor will be appointed by the Pastor.

Once all its members are in place, a meeting of the Scholarship Committee will be called by the pastor and the application process will begin.

The Father John V. Doyle Commemorative Scholarship

V. The Application Process

The Scholarship Committee will announce, through the Parish Bulletin, the school listserv and the school website when applications are being accepted for the annual scholarship. The application packet will be available at the rectory office and on the school website.

The application packet will consist of the following forms:

- A) Biographical Information (2 pages)
- B) A Student Essay Form
- C) Three Recommendation Forms
 - 1) Recommendation from two teachers (homeroom teacher & religion teacher)
 - 2) Recommendation from another adult other than a teacher, principal, or family member (i.e. coaches, moderators, etc.)

The task of having all forms completed and submitted by the deadline specified below is the responsibility of the student applicant. Recommendations must be requested of teachers at least one week in advance of the due date.

*If homeroom and religion teacher are the same, another middle school teacher may be asked to complete the 2nd teacher recommendation.

This year, the deadline for the receipt of the application and all accompanying forms is May 17, 2019.

FATHER JOHN V. DOYLE COMMEMORATIVE SCHOLARSHIP

Biographical Information (Part 1)

Please complete the following information:

Name of Student Applicant: _____

Street Address: _____

Town: _____

Phone: _____ Date of Birth: _____

Father's Name: _____

Mother's Name: _____

Please attach the following:

- A) Biographical Information (Part 2)
- B) Student Essay
- C) Transcript of Grades (Through 2nd trimester of Current School Year)
(Note: A copy of report card will be acceptable)

In addition, the student candidate is responsible for requesting the submission of three (3) recommendations from appropriate adults (2 teachers plus one other adult – see information sheet) **by the deadline referenced in the cover letter which accompanied this packet.**

Note Well: Recommendations should be submitted directly to the rectory by the person completing it.

For Scholarship Committee Use Only

IDENTIFYING



NUMBER

THE FATHER JOHN V. DOYLE COMMEMORATIVE SCHOLARSHIP

Biographical Information (Part 2)

I. Academic Information

Current School _____ Grade _____

Address (if other than Fr. John V. Doyle School)

Principal _____ Phone _____

Home Room Teacher _____

Please remember to attach a transcript of grades and ask your Homeroom Teacher to complete and submit a recommendation form.

II. Parish Information

Church of Baptism _____

Church of First Communion _____

My family has been registered at Saints John & Paul Parish since:

Year

Name of Religion Teacher _____

Please remember to ask your Religion Teacher (or another teacher if your Homeroom teacher is also your Religion teacher) to complete and submit a recommendation form.

III. Community/Social Involvement

Please indicate the student candidate's involvement in the activities listed below.
Check all that apply.

___ Sports ___ Scouts ___ Altar Server ___ Paper Carrier

___ Musical Instrument ___ Other (Please specify): _____

Please remember to ask a coach, scout leader, music teacher or any other adult with whom you come in contact as a result of your involvement in one of the above activities to complete and submit a recommendation form.

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Student's Personal Essay

The student applicant is requested to express, in his or her own words, why he/she is eager to receive this scholarship. Essays should be of 250 words or less. Please use the back of this page if necessary.

-more space on back-

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THE FATHER JOHN V. DOYLE COMMEMORATIVE SCHOLARSHIP

Student Recommendation

The student named below has applied for the Father John V. Doyle Commemorative Scholarship. In order to assist the Scholarship Committee in selecting a worthy candidate, please complete the attached form in a frank manner.

Student's Name _____

Name of Person Providing This Recommendation

I know this student in the following capacity:

_____ Homeroom Teacher _____ Religion or CCD Teacher

_____ Other (please specify): _____

ALL INFORMATION ON THIS FORM WILL BE KEPT IN THE STRICTEST CONFIDENCE

Please Note: In order for this recommendation to be considered, it must be in the hands of the Scholarship Committee **no later than May 17, 2019**. Completed recommendation forms can either be dropped off or mailed to Saints John & Paul Rectory (341 South Main St., Coventry, RI 02816)

Completed recommendation forms should be placed in a sealed envelope and clearly marked "Scholarship Committee".

For Scholarship Committee Use Only

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THE FATHER JOHN V. DOYLE COMMEMORATIVE SCHOLARSHIP

Student Recommendation

CONFIDENTIAL STATEMENT

Please indicate the amount of agreement you have to each of the statements regarding your dealings with the student applicant. Please circle one number on the accompanying scale.

- 1. In my dealings with this student applicant, he/she exhibits good work habits and applies himself/herself well to the task at hand.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

- 2. In my dealings with this student applicant, he/she generally exhibits good behavior.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

- 3. In my dealings with this student applicant, he/she appears to have good social skills, generally getting along with peers and adults.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

- 4. In my dealings with this student applicant, he/she has usually exhibited good Christian moral principles.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

- 5. In my dealings with this student applicant, he/she reacts positively when given responsibility.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

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Student Recommendation

Please supplement the opinions expressed on the front of this recommendation by writing a brief statement indicating why (or why not) you feel the student applicant is a good candidate for the Father John V. Doyle Commemorative Scholarship.

Please indicate the degree of enthusiasm with which you make this recommendation:

Highly Recommend Recommend Do Not Recommend

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Signature of Person Providing Recommendation

Date

THE FATHER JOHN V. DOYLE COMMEMORATIVE SCHOLARSHIP

Student Recommendation

The student named below has applied for the Father John V. Doyle Commemorative Scholarship. In order to assist the Scholarship Committee in selecting a worthy candidate, please complete the attached form in a frank manner.

Student's Name _____

Name of Person Providing This Recommendation

I know this student in the following capacity:

_____ Homeroom Teacher _____ Religion or CCD Teacher

_____ Other (please specify): _____

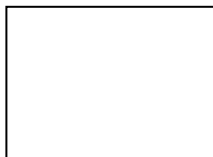
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Please Note: In order for this recommendation to be considered, it must be in the hands of the Scholarship Committee **no later than May 17, 2019**. Completed recommendations can either be dropped off or mailed to Saints John & Paul Rectory (341 South Main St., Coventry, RI 02816)

Completed recommendations should be placed in a sealed envelope and clearly marked "Scholarship Committee".

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Student Recommendation

CONFIDENTIAL STATEMENT

Please indicate the amount of agreement you have to each of the statements regarding your dealings with the student applicant. Please circle one number on the accompanying scale.

4. In my dealings with this student applicant, he/she exhibits good work habits and applies himself/herself well to the task at hand.

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

5. In my dealings with this student applicant, he/she generally exhibits good behavior.

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

6. In my dealings with this student applicant, he/she appears to have good social skills, generally getting along with peers and adults.

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

4. In my dealings with this student applicant, he/she has usually exhibited good Christian moral principles.

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

5. In my dealings with this student applicant, he/she reacts positively when given responsibility.

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

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[Empty box for identifying information]

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Student Recommendation

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Student's Name _____

Name of Person Providing This Recommendation

I know this student in the following capacity:

_____ Homeroom Teacher _____ Religion or CCD Teacher

_____ Other (please specify): _____

ALL INFORMATION ON THIS FORM WILL BE KEPT IN THE STRICTEST CONFIDENCE

Please Note: In order for this recommendation to be considered, it must be in the hands of the Scholarship Committee **no later than May 17, 2019**. Completed references can either be dropped off or mailed to Saints John & Paul Rectory (341 South Main St., Coventry, RI 02816)

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Student Recommendation

CONFIDENTIAL STATEMENT

Please indicate the amount of agreement you have to each of the statements regarding your dealings with the student applicant. Please circle one number on the accompanying scale.

- 7. In my dealings with this student applicant, he/she exhibits good work habits and applies himself/herself well to the task at hand.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

- 8. In my dealings with this student applicant, he/she generally exhibits good behavior.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

- 9. In my dealings with this student applicant, he/she appears to have good social skills, generally getting along with peers and adults.**

1	2	3	4	5
Disagree Strongly	Disagree Somewhat	No Opinion	Agree Somewhat	Agree Strongly

- 4. In my dealings with this student applicant, he/she has usually exhibited good Christian moral principles.**

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Student Recommendation

Please supplement the opinions expressed on the front of this recommendation by writing a brief statement indicating why (or why not) you feel the student applicant is a good candidate for the Father John V. Doyle Commemorative Scholarship.

Please indicate the degree of enthusiasm with which you make this recommendation:

_____ Highly Recommend _____ Recommend _____ Do Not Recommend

ALL INFORMATION ON THIS FORM WILL BE KEPT IN STRICT CONFIDENCE

Signature of Person Providing Recommendation

Date