



Norma R. Mungenast Endowed Scholarship

High School Student (New or Currently Enrolled)

Requirements:

1. Families must complete online variable Tuition Application from Smart Aid (www.smartaidforparents.com)
2. Request an official school transcript sent to the "Norma R. Mungenast Endowed Scholarship" c/o Montgomery Catholic Preparatory School 5350 Vaughn Road Montgomery, AL 36116

Currently enrolled MCPS student transcripts will be provided by the campus office after the completed application is turned in.
3. Secure three (3) sealed letters of recommendation from teachers, coaches/club advisors or pastors/ministers.
4. Write an essay and explain to the committee the following question:
Why is winning this award important to you?
5. Complete the scholarship application.
6. Submit complete application packet to the Business Office by noon March 15, 2021.



Norma R. Mungenast Endowed Scholarship

About the Scholarship:

The Norma R. Mungenast Endowed Scholarship Fund was established in October 2014 by The Colonel Andy Mungenast Investment and Charitable Trust, in honor of Mrs. Mungenast.. The Norma R. Mungenast Endowed Scholarship Fund was established to work with Montgomery Catholic Preparatory School in order to share God's blessings to further His kingdom.

Amount of Award:

The Norma R. Mungenast Scholarship is awarded annually to one or more students enrolled at Montgomery Catholic Preparatory School's High School Campus. The Norma R. Endowed Scholarship amount will vary annually. Endowment earnings and donations shall be used to award one or more scholarships to students who are currently enrolled at MCPS or will be enrolled in the following academic year. By April 1 each year, MCPS shall review the Trust and the amount that has been donated and earned by the Mungenast Scholarship Fund in the prior 12 months, and up to this amount (as determined by the scholarship committee) shall be available to award scholarships to deserving students.

Qualifications for this Scholarship:

For the purpose of this scholarship, the criteria are:

1. The student is a new or currently enrolled student, at Montgomery Catholic Preparatory School's High School Campus.
2. The family demonstrated financial need.
3. The student indicates a serious commitment to learning.
4. The student exhibits positive Christian characteristics.
5. The student has good character, positive community involvement and/or strong involvement in extracurricular activities.

Persons with special educational needs are welcome to apply. Preference will be given to students who are from Catholic families.

Selection Committee:

There are five members of the selection committee established by the Trust who will evaluate and select one or more individuals each year to receive the Norma R. Mungenast Scholarship, based on the criteria above.

Application Deadline: March 15

Announcement of the Award: Scholarships will be awarded in the month of June each year. First award was given in June 2015.



MONTGOMERY
Catholic
PREPARATORY SCHOOL

Norma R. Mungenast Endowed Scholarship Application

Applicant Information:

Full Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Mother's Name: _____

Father's Name: _____

Grade: _____ School Attending: _____

Church/Parish Membership: _____

Club Memberships:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Organized Sports/Athletic Team Memberships:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Community Service Activities:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Write an essay and explain to the committee the following question and attach this to your application: ***Why is winning this award important to you?***

Applicant Signature: _____ Date: _____



MONTGOMERY
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 PREPARATORY SCHOOL

Montgomery Catholic Preparatory School

Letter of Recommendation

Instructions: We appreciate your willingness to help us get to know the applicant for the award in a fuller way. We ask that you be candid with us, so that we can fairly assess the applicant's strengths and weaknesses.

It is our desire that this recommendation be kept confidential. Once you are finished with this form, we ask that you **seal it in an envelope** and on the back of this envelope, **across the seam, sign your name**. This signature will be cross-referenced with the signature on this application for verification purposes.

Once this is complete, **please return the sealed envelope to the applicant**, who has been asked to turn the recommendation as part of a completed packet.

General Information

Name of applicant for recommendation: _____

Name of recommender: _____

Address of recommender (street, city and zip) _____

How long have you known the applicant? _____ In what capacity? _____

Please rate the applicant on a scale of 1-5, 5 being the highest or best
 (If no knowledge, label N/A):

_____ Commitment to his or her faith

_____ Commitment/Loyalty to family

_____ Academic commitment

_____ Commitment to a moral life

_____ Politeness/Courtesy

_____ Ability to get along with peers

_____ Volunteerism/Service to others

_____ Leadership of peer group

Signature of Recommender: _____ Date: _____