

THE MARY LOUIS ACADEMY

APPLICATION FOR SCHOLARSHIP EXAMINATION

Name _____ **Date of Birth** _____

Address _____

Apt. No.

City

State

Zip Code

Present School _____

Location _____

Parent/Guardian Signature

I recommend _____

Name of Student

to take the Scholarship Examination for The Mary Louis Academy on November 30, 2011.

Principal/8th Grade Teacher or Guidance Counselor Signature

Comments: _____

I registered to take the TACHS or Rockville Centre Co-Op Exam and The Mary Louis Academy is my **first choice** [016].

Signature of Student

Application Deadline is November 2, 2011

Mail to: The Mary Louis Academy
Academic Scholarship Committee
176-21 Wexford Terrace
Jamaica Estates, NY 11432

Two weeks prior to the examination you will receive a letter with further instructions. Please print the name that is on your mailbox.

Parent/Guardian Last Name