



John XXIII Montessori Children's Center

Blessed John XXIII Scholarship Fund

1. **Application committee for submission of application:**

Blessed John XXIII Fund Committee
c/o Walker Financial Services
P.O. Box 41
Front Royal, 22630

2. **Application Availability:** Found on our website: john23mcc.org, under Admissions, Application Forms. Print out form for filling out by hand.
3. **Duration of Scholarship:** One time award per academic year of the awarded amount in the form of a tuition voucher to **John XXIII Montessori Children's Center** to be applied to tuition.
4. **Eligibility:** Children of families who have applied and been accepted into the Three Morning Academic Program at John XXIII MCCC. A **Blessed John XXXIII Fund Application** and a most recent **Federal Tax Return** are required.
5. **Basis of Award:** The scholarships are awarded based on submission of an application and a copy of tax return form for the most recent year by the established deadline. Applicants are reviewed on the basis of need, a brief written essay about why the tuition assistance is being requested, and their participation in our annual fundraiser. Applications will be reviewed by the independent Bl. John XXIII Fund committee once per year. Late or incomplete applications will not be considered.
6. **Advertisement of Scholarships:** On or about March 1st each year.
7. **Deadline for Submission of Application Packet:** The complete application packet must be sent to the above address and postmarked by **May 15th** or hand-delivered by 5:00 pm on that date to the **Walker Financial Services** office at 986 John Marshall Highway, Front Royal.
8. **Award Date:** On or about **June 30th**. Recipients will be notified by a letter via mail or email.

For questions regarding the Blessed John XXIII Fund contact Laura Accettullo:
laura@john23mcc.org or 540-636-3236.



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Blessed John XXIII Fund Application

PERSONAL INFORMATION - Please type or print.

Parent's Names:

Father:

Last	First	Middle
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Mother:

Last	First	Middle
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Address

Street	City	Zip
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Home phone # _____ Email address _____

I am requesting the Blessed John XXIII Fund Scholarship for the following children who are enrolled in the Three Morning Academic Program:

1.

Name	Birth date
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2.

Name	Birth date
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3.

Name	Birth date
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4.

Name	Birth date
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(Use reverse side if additional space is required)

