

**St. Francis Academy Alumnae Association  
Legacy Scholarship**

St. Francis Academy, located on McRoberts Road between Hamilton and Grove Roads, educated thousands of South Hills girls from the early 1930's through 1991. Operated by the Sisters of St. Francis of the Providence of God, the school was closed in 1991 because of declining enrollment and lack of sufficient Sisters to teach. However, the many alumnae that received their high school education at that site have an active and progressive alumnae association that wishes to continue the Catholic School values that were taught and strengthened by the Sisters.

As a result of this desire, the St. Francis Academy Alumnae Association is pleased to continue its Scholarship program for a tenth year. This \$1,000 award is provided through the generosity of the SFA Alumnae of the former St. Francis Academy. It is a recurring scholarship for each academic year. It will be awarded to an incoming freshman attending Seton LaSalle High School.

The scholarship is designed to provide monetary assistance to a student who demonstrates academic achievement, service to church and community, and an admiration for the examples of St. Francis of Assisi.

To be considered for this Legacy Scholarship, please

1. Complete this application in its entirety (print or type)
2. Attach an essay of 500 words or less (typed) talking about:
  - a. how one or two of the following qualities of St. Francis is reflected in your life
    - i. commitment to prayer
    - ii. patience
    - iii. care/concern for animals and the environment
    - iv. loyalty to family and God AND
  - b. why attending a Catholic high school is important to you.  
*(Please note that the essay should not be a biography of St. Francis.)*
3. List your community involvement - service, clubs, organizations, parish groups, volunteering, etc.
4. Include one letter of recommendation (up to two pages) from someone who has worked with you and/or known you. This letter can be from your teacher, parish priest, neighbor, friend, or family member.
5. Include a copy of your most recent report card, grade-school transcript, and results from the SLS Placement Test. If you do not have the results of the Placement Exam, please note this on your application.
6. Mail or deliver application package to:

**Seton LaSalle High School  
Attn: SFA Alumnae Association Legacy Scholarship  
1000 McNeilly Road  
Pittsburgh, PA 15226**

**Please note the following:**

**THE STUDENT WHO RECEIVES THE LEGACY SCHOLARSHIP IS REQUIRED TO ATTEND THE SFA ALUMNAE ASSOCIATION TULIP LUNCHEON ON SUNDAY, APRIL 28, 2019 AND THE ALUMNAE MASS ON SUNDAY, SEPTEMBER 15, 2019. AN ABSENCE AT EITHER OF THESE EVENTS MAY RESULT IN FORFEITURE OF THE SCHOLARSHIP FUNDS.**

**St. Francis Academy Alumnae Association  
Legacy Scholarship**

Applicant's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Email address \_\_\_\_\_

Current School \_\_\_\_\_

Address of School \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Principal's Name \_\_\_\_\_ School Phone \_\_\_\_\_

Father's/Guardian Name \_\_\_\_\_

Mother's Current/Maiden Name \_\_\_\_\_

Please contact Clare Rex, Chairperson, at 412-276-7132 or 412-417-3310 with any questions regarding this scholarship.

Name \_\_\_\_\_ Year of Graduation \_\_\_\_\_

Street Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

***Please complete the Community Involvement page (making additional copies if needed), attach your essay, and all other documentation to this Application, and send to the address on Page 1.***

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Applicant's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

**COMMUNITY INVOLVEMENT**

Type \_\_\_\_\_

From Date \_\_\_\_\_ To Date \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Description of involvement \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type \_\_\_\_\_

From Date \_\_\_\_\_ To Date \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Description of involvement \_\_\_\_\_

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\_\_\_\_\_

Type \_\_\_\_\_

From Date \_\_\_\_\_ To Date \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Description of involvement \_\_\_\_\_

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