



SETON LASALLE

CATHOLIC HIGH SCHOOL

THE EDWARD MARTIN RYAN, JR. MEMORIAL SCHOLARSHIP

Seton LaSalle Catholic High School established the Edward Martin Ryan, Jr. Memorial Scholarship in the 2000-2001 academic year in memory of Edward Martin Ryan, Jr., a member of the South Hills Catholic High School Class of 1964 and a charter member of the Seton LaSalle Catholic High School Hall of Fame.

The Edward Martin Ryan, Jr. Memorial Scholarship will be awarded annually to two incoming freshmen who display a Christian attitude, academic achievement, parish involvement, and financial need. The scholarships will be a financial award of \$2,500 per year, renewable for the remaining high school years, provided the students maintain a 3.0 QPA and consistently demonstrate the positive qualities of Seton LaSalle students as outlined in the Student-Parent Handbook.

APPLICATION PROCESS

Applications for the Edward Martin Ryan, Jr. Memorial Scholarship are due in the Seton LaSalle Catholic High School Admissions Office. A completed application should include:

- The application form
- A description of parish and/or community involvement
- The completed essay, "Why I want to attend Seton LaSalle Catholic High School"
- One (1) letter of recommendation from the student's current elementary school principal
- One (1) letter of recommendation from a 6th, 7th, or 8th grade teacher from the student's current elementary school
- A copy of the student's elementary school transcript
- A copy of the student's most recent report card
- A copy of the student's Seton LaSalle High School Placement Test results
- A completed FACTS Financial Aid application form (mailed separately)

Additionally, your family must have completed the FACTS application for financial aid. Seton LaSalle will confirm your FACTS submission for the scholarship committee and documentation does not need to be provided by your family.

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1000 McNeilly Road, Mt. Lebanon, PA 15226 • (412) 561-3583 • SLSHS.org



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THE EDWARD MARTIN RYAN, JR. MEMORIAL SCHOLARSHIP APPLICATION FORM

This application must be filled out completely and accurately. Please print neatly or type. All applications must be returned to the Seton LaSalle Catholic High School Admissions Office.

Applicant's Name: _____

Home Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____

Father/Guardian's Name: _____

Mother/Guardian's Name: _____

Current Elementary School: _____

Principal's Name: _____

Teacher Writing Recommendation: _____

School Address: _____

City: _____ State: _____ ZIP: _____

School Phone: _____

