**APPLICATION**

Fr. David Hiller Fund (FDHF) Scholarship

10235 Mill Rd. Cincinnati, OH 45231

**IMPORTANT:** Parents/Guardians-please read this application carefully and fill it out completely.

If you have questions, please call Mr. Paul Ahrnsen 513-542-8554

Student’s Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-Apt.\_\_\_\_\_\_\_\_\_-Zip\_\_\_\_\_\_\_\_\_\_

Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School planning to attend in School Year 2025-2026:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade in School Year 2025-2026 (circle one) 9 10 11 12

Student’s Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kolping Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member of Kolping since\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent and Student have been involved in the following Kolping volunteer activities:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONFIDENTIAL INFORMATION**

In order for the application to be considered, you must include the following:

-A copy of the essay written by the student. This year, the Father David Hiller Fund invites students to apply for the scholarship by submitting a 500 word essay explaining why they wish to attend a Catholic High School. We encourage you to reflect on how a catholic education will support your spiritual growth, academic journey and personal development. This is an opportunity to share your thoughts on how faith, community and service will shape your High School experience and prepare you for the future.” (no AI generated essays will be accepted and will be grounds for disqualification)

-A copy of the student’s grade transcript and recommendation from student’s teacher or Principal.

On a separate page, describe any unusual circumstances, e.g., medical problems, loss of parent’s job, multiple children attending parochial schools, etc., which should be considered in the evaluation.

**PARENTAL RELEASE FORM**

I give permission for the Fr. David Hiller Fund to have access to any school records

of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of son or daughter) to determine academic eligibility

for continued participation in the FDHF scholarship program.

Signature of Parent or Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Send your application and related forms to:

Fr. David Hiller Fund

10235 Mill Rd. Cincinnati, OH 45231

Attn: Paul A. Ahrnsen