



## ANCIENT ORDER OF HIBERNIANS

Friendship, Unity and Christian Charity

PFC Michael Brian McGinnis, USMC, Bucks County Division 2  
Post Office Box 7, Newtown, PA 18940

[www.aohnewtownpa.com](http://www.aohnewtownpa.com)

[www.LicensedToKilt.org](http://www.LicensedToKilt.org)

## SCHOLARSHIP APPLICATION

The Ancient Order of Hibernians, Division 2, Newtown PA (AOH Div 2) has announced that scholarship applications are now available for local 8<sup>th</sup> grade elementary and high school students of Irish descent, attending Catholic schools for the 2016-2017 school year. Two scholarships of \$1,000.00 each will be awarded to the deserving students.

Students may acquire the Application Form from their parish school offices or accessing the AOH Div 2 website and downloading the form and instructions, at [www.aohnewtownpa.com](http://www.aohnewtownpa.com) or [www.LicensedToKilt.org](http://www.LicensedToKilt.org)

*All completed applications should be sent to:*

A.O.H. Div. 2 Newtown  
Attn: 2016-17 Scholarship Committee  
P.O. Box 7  
Newtown, PA 18940 0007

*The Deadline for Receipt of Applications, with supporting documents:*

5:00 PM May 1, 2016

Henry Conroy  
Dir of Communications  
[hconroy@comcast.net](mailto:hconroy@comcast.net)  
215-932-2261 cell



# Ancient Order of Hibernians

Division 2, Newtown, Bucks County, PA



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## 2016-17 SCHOLARSHIP APPLICATION

\* Please attach the following, along with this Application, dated and signed, by May 1st, 2016:

- **Proof of Parish Membership** (e.g., a letter of recommendation from your Pastor);
- **Letter of Recommendation** from a current teacher;
- The **Secondary Catholic School** you will be attending, or, where currently enrolled;
- Minimum 1,000 word **Essay** on: *“The Role of the Irish during the U.S. Civil War (the War Between the States)”*;
- A brief **Summary** of your Irish Family heritage.

Please submit all materials in a single package, no later than May 1st, 2016 to:

A.O.H. Div. 2 Newtown  
 Attn: 2016-17 Scholarship Committee  
 P. O. Box 7  
 Newtown, PA 18940-0007

### PLEASE PRINT or TYPE ALL INFORMATION

Name of Applicant: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_ DOB: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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Grade you will enter in the 2016-17 Academic Year:

\_\_\_\_\_

Principal's Name: \_\_\_\_\_

Principal's Contact Number: \_\_\_\_\_

Name of Parish: \_\_\_\_\_

Parish Pastor: \_\_\_\_\_

Name(s) of Parent or Guardian: \_\_\_\_\_

\_\_\_\_\_

**\* N.B. – Permission to Use Photograph and/or Video**

*I hereby grant to the Ancient Order of Hibernians, Division 2, Newtown, (A.O.H. Div. 2) its' affiliates and assigns, the right to take photographs and/or video of me and my family in connection with the Scholarship Program identified above, and any related activities.*

*I authorize A.O.H. Div. 2, its assigns and transferees to copyright, use, and publish the same in print, and/or electronically.*

*I agree that A.O.H. Div. 2 may use such photographs and/or video of me, with or without my name, and for any lawful purpose, including for example such purposes as fund-raising, publicity, illustration, advertising, and Web content.*

**By virtue of my signature below, I affirm that I have read, understand, and agree to the above, concomitant to the submission and consideration of this Application for a Scholarship:**

\* Signature of Applicant: \_\_\_\_\_

\* Signature of Parent or Guardian: \_\_\_\_\_

Date: \_\_\_\_\_, 2016

**Submission Deadline: 1<sup>st</sup> May, 2016**