



Grant Application

Applicant Name: _____ Date: _____

Media Organization: _____

Title or Job Description: _____

How long have you been with this media organization? _____

Your membership category in CPA: Registered Rep Staff Other _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Educational Institution/Program: _____

Course and purpose of proposed course of study? _____

Supervisor Approval: _____

Are you receiving other financial aid? _____

Annual household income: _____ Number of dependents: _____

Number of dependents attending college, private, or parochial school: _____

If I receive a CJSF grant, I agree to help promote awareness of and donations to the Catholic Journalism Scholarship Fund by such means as writing articles for *The Catholic Journalist*, producing multimedia or other content for CJSF's pages on the CPA website and social-media sites, giving interviews to CPA member publications, speaking at the Catholic Media Conference and/or other promotional activities.

Signature: _____ Date: _____

Please return this form to:

**Catholic Journalism Scholarship Fund
Catholic Press Association
205 West Monroe St. Ste. 470
Chicago, IL 60606
or
fax: 312.361.0256**