

Veritas Faith Formation
Ss. Peter & Paul and St. Mary of the Angels Parishes
Scholarship Gift Form

Donor's Name(s): _____

Mailing Address: _____
City _____ State ____ Zipcode _____

Phone (with Area Code) _____ - _____ - _____

Email Address (optional) _____@_____ . _____

Amount of Scholarship: \$ _____

Name(s) of Person(s) in whose honor or memory
the scholarship is given: _____

Receipt Issued by: _____ Date: _____

**Please route a copy of this form, and of the receipt to Michael Lee in the Faith Formation Office.*