APPLICATION FOR THE
SABATO SCHOLARSHIP
ACADEMIC YEAR
ST. PIUS X SCHOOL

NAME: _____ GRADE: _____ DATE: _____

State below how you or members of your family have contributed to the benefit of the school and parish through your volunteer activities.

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The scholarship will be awarded to a rising 5th through 8th grade St. Pius X student.

Submit entries to school@piusxparish.org.

If you would like to learn more about the Sabato Family,
please visit the school website at www.stpiusxschoolva.org.