



5349 Dolloff Rd. Cleveland, Ohio 44127  
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## High School Grant Application

PLEASE PRINT

Today's Date: \_\_\_\_\_

Society No: \_\_\_\_\_ Policy No.: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

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

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

Email: \_\_\_\_\_ Phone No: \_\_\_\_\_

Catholic High School Name: \_\_\_\_\_

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

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

School Phone No: \_\_\_\_\_ School Website: \_\_\_\_\_

Grade Level for Upcoming School Year: \_\_\_\_\_

**MUST BE SUBMITTED EVERY YEAR**

Please Mail this Completed Application to:

Czech Catholic Union  
College Grant  
5349 Dolloff Road  
Cleveland, Ohio 44127