



Golden Rose Award

Date of Application: _____

Applicants Name: _____

Applicants Date of Birth: _____ Age: _____ Grade : _____

Parents/Guardians Names: _____

Address: _____

Email Address: _____ Telephone #: _____

Parish Name, City & State: _____

School Name City and State: _____

Grade Point Average: (optional) _____

Date received the Diocesan/Province Council Golden Rose Award _____

Name of Person Submitting Nomination _____

Telephone _____ Position _____

Please include the original local Golden Rose application for this young woman that helped you decide to give her this award

Criteria Checklist

- ☐ A young woman ages **14-21** who received the Golden Rose Award from her local A/DCCW or Province
- ☐ A young woman who is an active member of a parish involved in activities (youth groups, ministries, volunteer) who attends Sunday Mass regularly.
- ☐ A young woman active in school activities (sports, student government, clubs, class officer). **Her GPA is optional.**
- ☐ A young woman who is spiritual and reflects the Gospel values in her everyday life
- ☐ A young woman who shows leadership qualities in school and parish activities and goes above and beyond in a service project when compared to her peers.



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Golden Rose Award Applicants Profile

Please print legibly or type.

List the parish activities applicant is involved in:

List the school activities applicant is involved in:

How does this young woman give witness to living a spiritual life or how does this young woman reflect Gospel values in her everyday life?

How does this young woman demonstrate leadership in school and parish activities?



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Describe the service project this young woman went over and above in her participation.

Please include the original local Golden Rose application for this young woman that helped you decide to give her this award.

Is there anything else you want us to know about this young woman.

Along with the Golden Rose Award Application and Profile, have you included?:

- ☐ letter of recommendation from her pastor,
- ☐ letter of recommendation from the local Parish CCW President or the sponsoring Diocesan or Province Council President
- ☐ The original local Golden Rose Award application.

Email the above packet to awards@nccw.org or Mail to Golden Rose Award 3211 4th ST NE Suite #338 Washington, DC 20017. Packets accepted until July 1, 2025