Academic Scholarship Application





Name:		Date of	Application:	/	_
Address:					_
City:		State:		ZIP:	_
Date of Birth	n:/	Phone: ()		_
E-Mail:					_
	·				-
College / Un	iversity (for continuing students	s):			_
Year / Level:					_
Verification	of Eligibility (select only one):				
□ Iamam	ember in good standing of Cour	ncil		#	
□ I am the	spouse / son / daughter of	#	<i>.</i>	a member in goo	d standing of Counci
☐ I am the	spouse / son / daughter of#_		,	a deceased mem	ber of Council me of his death.
in one hardo	nit the application, verification, properties to the copy packet. Incomplete forms, nes and other similar omissions	pages missing a red	uired signat		•
	ATTESTED and AUTHORIZED: Grand Knight: (Print Name)				
	Grand Knight: (Signature)			Date:	
	Financial Secretary: (Print Na Financial Secretary: (Signatur				



Academic Scholarship Application Personal Statement



Name:	
I plan to attend	in the fall.
I have not yet committed to a college or university, but I am consideration	dering the following:
As of this time, have you received notice of any other financial aid Please answer the following questions (each answer on a separate	
1. Describe your academic performance over the course of your h distinction you have received for academics or leadership.	nigh school career. Indicate any awards of
2. Describe your involvement in activities outside the classroom. Presponsibilities, Church activities, and community and other service the school year(s) involved.	· · · · · · · · · · · · · · · · · · ·
3. Write a one-page essay on the theme "Why I Am Seeking This S detail for the Scholarship Committee to appreciate your application	·
I hereby authorize the release of this Scholarship Application, refe Scholarship Committee. I certify that all information provided is tr Student's Signature:	rue to the best of my knowledge.
NOTE: Submit the application, verification, personal statement, re one hardcopy packet. Incomplete forms, pages missing a require names and other similar omissions may disqualify the application.	ed signature, undated applications, forms without
Application packet checklist (submit all documents in one hardco California State Council PO Box 2649 West Covina, CA 91793 Attn: Scholarship Chairman Completed application with all required signatures and Answers to the three questions by the applicant (one panswer). Three written recommendations from non-relatives. Transcripts and /or other academic performance from	d dates. page for each