

## Lay – Seminarian – Religious Scholarship Application (Application deadline April 1)



Name:	Date of Application:/			
Address: _				
City:		State:	ZIP:	
Date of Bir	th:/	Phone: ()		
E-Mail:				
College, U	niversity, Seminary or Progran	n of Foundation:		
Current Ac	cademic Level:			
Verificatio	n of Eligibility:			
□ I am no	ow attending a seminary or rel	ligious program.		
☐ I will b	egin attending a seminary of r	eligious program later this yea	ar.	
required ir	mit the application, verification of ormation in one hardcopy pans, forms without names and o	acket (incomplete forms, page	es missing a required signat	ure, undated
ATTESTED	and AUTHORIZED:			
	Grand Knight: (Print Name	e)		
	Grand Knight: (Signature)		Date:	
	Council Name:		#	
	OR Endorsement By:			
	Position:			



## Lay – Seminarian – Religious Scholarship Application Personal Statement



Name:	
☐ I plan to attend	in the fall.
☐ My Diocese / Religious Order has not yet assigned me to following seminary or house of formation is under consideration	
Please answer the following questions (each answer on a se	parate sheet of paper).
1. Describe your academic performance over the course of distinction you have received for academics or leadership.	your prior school years. Indicate any awards of
2. Describe your involvement in activities outside the classr family responsibilities, Church activities, and community / o and the year(s) involved.	• • •
3. Write a one-page essay on the theme "Why I Am Seeking detail for the Scholarship Committee to appreciate your app	•
I hereby authorize the release of this Scholarship Applicati Scholarship Committee. I certify that all information provide	· ·
Applicant Signature:	Date: <i>/</i>
<b>NOTE</b> : Submit the application, verification, personal statem one hardcopy packet. Incomplete forms, pages missing a renames and other similar omissions may disqualify the application.	quired signature, undated applications, forms without
<b>Application packet checklist</b> (submit all documents in one halfornia State Council PO Box 2649	nardcopy packet to the State Scholarships Chairman):
West Covina, CA 91793	
Attn: State Scholarship Chairman	
Completed application with all required signature	
<ul> <li>Answers to the three questions by the applicant answer).</li> </ul>	
☐ Three written recommendations from non-relat	
☐ Transcripts and /or other academic performance	
☐ Submitted and post-marked by April 1 deadline	<u>.</u>