

GENERAL de LAFAYETTE ASSEMBLY

4th Degree Knights of Columbus

Application for Scholarship

Date: _____/____/_____ (month/day/year)

Name of Applicant: _____

Address: _____(street/city/state/zip)

Parish: _____

Parent's Names: (Father) _____ (Mother) _____

Parent's Address if different than above:

Will Graduate from: _____ Are you an immediate relative of a Knight of Columbus?

Yes, Council Number and Relation: _____ No: _____

Class Standing: _____ (rank) Total Credits: _____ (number)

Honor Course Credit: _____ (number)

Work outside the school: _____ (hours) _____ (where)

Have you selected your college major? _____ If so, please indicate: _____

Please submit this application and a typed essay why you believe you should receive this scholarship and how it will help you achieve your goals. Please include information from the areas below:

Academic Clubs and/or Service Clubs or Associations Extra-Curricular Activities (Sport, Band, Music, Scouting, F.F.A., 4H, etc..)

Involvement in Catholic/Parish Community

Essay should be reviewed and signed by Religious Education Director or Teacher

Official Transcripts Required

This application is to be filled out completely and post marked by March 25, 2019 to:

Joseph Bloom

7804 Lydia Lane

Lafayette, IN 47909