Knights of Columbus Scholarship

Amount: TBA

Deadline:

Submit your completed application packet to the Guidance Office no later than NOON, May 1,2024

Checklist:

Application

High School Transcript

Letter from applicant requesting the scholarship and any pertinent information you would like to share.

Resume

Signature of applicant

Knights of Columbus Scholarship Application

The Knights of Columbus of Jefferson County awards a scholarship to one member of the graduating class of Madison, Prince of Peace and Southwestern High Schools annually. The application must include the following:

The application must include the following:	
1. The Scholarship Application form.	
2. High School Transcript	
3. A letter from the applicant requesting the scholarship as well a information that the applicant wants the committee to know about	
4. Resume	
5. Signature by the applicant verifying that the information include	led is true and complete
I CERTIFY THAT ALL THE INFORMATION ON THIS AI TRUE AND COMPLETE TO THE BEST OF MY (OUR) KN	
Applicant	Date
Parent or Guardian	Date

Knights of Columbus Scholarship Application

Type or print all information in blue or black ink.

Attach a copy of your transcript with this amplication.

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Student Name:	•	<i>(</i> 2).	æ å	School:		• * :
Address:				Phone:		_
Parent Information	~ .				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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Mother's Name:			_			2 3 3 3
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Father's Name:						
Occupation:			Company:			
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School Honors, A	wards an Grade 9	d Activiti	ies (may ati	ach student res	ume if desired)	

Community Honors, Awards and Activities

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Please explain any personal and/or family conditions that should be considered when evaluating this application: (You may attach a separate page if necessary.)