

KNIGHTS OF COLUMBUS COUNCIL 2506

Waconia, MN 55387

APPLICATION FOR COLLEGE TUITION SCHOLARSHIP

Send completed form and supporting documents to:

waconiaknights@gmail.com

ALL QUESTIONS MUST BE ANSWERED. This completed application must be returned on or before June 1 for the upcoming school year. Accompanying it must be a current transcription of the student's academic record, a letter by you describing your interests and vocational goals, a letter or recommendation from your high school principal or counselor, a letter of recommendation from your pastor, and a recent photograph of yourself.

STUDENT'S NAME _____

ADDRESS _____

TELEPHONE _____ EMAIL ADDRESS _____ BIRTH DATE _____

Is father or family member a member of Knights of Columbus Council # 2506? _____

FOR FRESHMAN

Scores:

S.A.T. _____ A.C.T. _____

Class Rank _____ # in Class _____

High School _____

City and State _____

Year of Graduation _____

I will be a freshman during the _____ (example: 2023-2024) school year

College/University _____ City and State _____ Zip Code _____

Father's Name _____ Mother's Name _____

Father's Occupation _____ Mother's Occupation _____

Father's Employer _____ Mother's Employer _____

Names, ages, status (married or single) of brothers and sisters: _____

Hobbies _____

Subject You Prefer _____

High School Sports Activities _____

Extra-Curricular High School Activities _____

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Students Name _____

How did you spend vacations during your high school years?

Did you earn money while in high school? _____

Type of Work: _____

Do you plan to earn part (or all) of your college education expenses? _____

How? _____

In what parish activities are you engaged? _____

In what community activities are you engaged? _____

High school achievements? _____

Please explain any special circumstances relating to your needs _____

Place Your
Picture Here

All items on this application have been answered truthfully, accurately, and completely. WE UNDERSTAND that financial aid may be cancelled if disciplinary probation is imposed, and that if a tuition scholarship is awarded, the grant may be sent directly to the college or university indicated.

Student Signature

Date

Signature of Parent or Guardian

Date

NOTE: CHECK ALL ITEMS FOR COMPLETENESS

DO NOT WRITE BELOW THIS LINE

Date Received _____ Membership Confirmed _____ Approved _____