

# SANDUSKY KNIGHTS OF COLUMBUS

## SCHOLARSHIP APPLICATION

### Instructions for completing application:

- 1) Application is to be completed by the applicant
- 2) Type or print clearly
- 3) Attach your current transcript
- 4) Have two references completed and mailed by the person referring.
- 5) Send application to *Knights of Columbus - Scholarship Chairman, P.O. Box 856, Sandusky, OH 44871-0856*
- 6) Eligibility: Your living father or grandfather must be a member of Sandusky Knights of Columbus and you must be a graduating senior of St. Mary Central Catholic High School, Sandusky High School, Perkins High School or Margareta High School.

**DEADLINE:** May 1<sup>st</sup> of this year

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

High school you attend: \_\_\_\_\_

Name of your living father or grandfather who is a member of Sandusky Knights of Columbus:  
\_\_\_\_\_

Post-secondary school for which scholarship is requested:

School: \_\_\_\_\_ Location: \_\_\_\_\_

Will you attend full time \_\_\_\_\_ or part time \_\_\_\_\_?

Degree sought: \_\_\_\_\_



Dear \_\_\_\_\_:

I have applied for the Knights of Columbus Scholarship and request that you complete this reference for me. Please send it to the address below before **April 15<sup>th</sup>**. If it is not received by this date, the application will not be considered.

Name of Scholarship Applicant: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_

1. How long have you known this applicant and in what capacity?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What characteristics do you feel the applicant possesses that would make him/her successful in his/her education?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What is your evaluation of the applicant's academic ability?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Are there any unique factors that make the applicant especially worthy of receiving scholarship support?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Additional comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Please mail reference to: *Knights of Columbus - Scholarship Chairman*

*P.O. Box 856, Sandusky, OH 44871-0856*

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Additional comments:

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\_\_\_\_\_  
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Signed \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Please mail reference to: **Knights of Columbus – Scholarship Chairman**

**P.O. Box 856, Sandusky, OH 44871-0856**