

CODE

Donald Kaup Memorial Knights of Columbus Scholarship APPLICATION FORM

*Please type or print and limit responses to these pages
unless attachments are necessary.*

DEADLINE: April 1st

NAME _____ DATE _____

CURRENT ADDRESS _____

HOME TELEPHONE (_____) _____ - _____ CELL PHONE (_____) _____ - _____

EMAIL ADDRESS _____

PARENTS'/GUARDIANS' NAMES & ADDRESSES (IF DEPENDENT) _____

ARE YOU CATHOLIC? YES / NO

WHAT CHURCH DO YOU CURRENTLY ATTEND?

CAREER GOALS (INCLUDING THE FIELD OF STUDY YOU PLAN TO PURSUE):

PAST OR PRESENT EMPLOYMENT:

EMPLOYER(S)	DATES OF EMPLOYMENT	# OF HOURS/WEEK



CODE

ACTIVITIES AND HONORS, VOLUNTEER AND COMMUNITY PROJECTS:

ACADEMIC

ATHLETIC

MUSIC

SPEECH/DRAMA

CHURCH

OTHER

ADDITIONAL HONORS OR AWARDS _____

ATTACHMENTS REQUIRED:

- 1) A letter from the school office stating that you are either in the top 50% of your class or have a grade point average above 2.0 (or 80%).
- 2) A 200-word essay stating “Why Furthering My Education is Important to Me.”

I authorize representatives of my high school, college, university, vocational or technical school where I attend, and others to provide the Scholarship Selection Committee with any of my personal records or transactions for the purpose of evaluating this scholarship request.

Applicant Signature

Date

DELIVER OR SEND THIS APPLICATION AND ATTACHMENT TO:

Steve Alder
Stuart Knights of Columbus
88041 473rd Ave
Atkinson, NE 68713

DEADLINE: APRIL 1st

*****YOU WILL BE NOTIFIED OF THE RESULTS OF YOUR APPLICATION*****