KNIGHTS OF COLUMBUS ST. CECILIA COUNCIL 10195 2017 SCHOLARSHIP APPLICATION

Eligibility: You must be a high school senior planning on continuing your education in the 2017-2018 school year. You must also be a member of St. Cecilia's Parish.

<u>Submission of Application</u>: Please mail this application along with supporting materials to: St. Cecilia Knights of Columbus Scholarship, 42 Main Street, Wilbraham, MA 01095. The deadline for receipt of your application is April 14, 2017.

Name:			
Address: Number and Street		State	Zip
Telephone:			
High School:	Graduation Date:_		
GPA:			
Education Plans for 2017-18 School Ye	ear:		
Have you been accepted?			
Names of Parents/Guardians:			
Names, Ages, and Educational Status o	f Siblings:		
List activities that have provided serv e of hours involved:	ice to your school, a	and the appro	oximate number

List activities that have provided service to your community , and the approximate number of hours involved:			
List activities that have provided service to your church , and the approximat of hours involved:	e number		
Other Activities (sports, clubs, awards, etc):			
Work Experience, including Employer, Position, Hours Worked, and Dates:			
<u>Personal Statement</u> : The Knights of Columbus Scholarship is intended to recestudents who have served their school, church, or community. In 250 words or please describe why you think you are a deserving applicant for the Knights of Scholarship. This is an opportunity to provide more information about your senactivities, your values, and your aspirations. Please type and sign this Statement	less, Columbus rvice		
Also, please include a copy of your high school transcript (a photocopy is s	<u>ufficient)</u> .		
Signature of Applicant:	ate		
Signature of Parent/Guardian:	ate		