

KNIGHTS OF COLUMBUS MASSACHUSETTS STATE COUNCIL

470 Washington Street Suite #6, Norwood, MA 02062 Tel: 781-551-0628, Fax: 781-551-0490, E-mail state.office@masskofc.org

APPLICATION FOR STATE COUNCIL CATHOLIC COLLEGE SCHOLARSHIP

Five \$1,000 Scholarships Due Date NLT Close of Business April 1, 2023 An applicant cannot win the Scholarship more than once

Please Type or	Print Clearly				
Full Name:				_ Date of Birth:	
	(Last)	(First)	(MI)		
Home Address:					
	(Street and Number)	(0	City)	(State)	(Zip)
Mailing Addres	ss: (Only if different from Abo	ove)			
			Telephone No.		
Sex: () Male	() Female				
Are you a mem	ber of the Knights of Columb	us: () yes	() no Membership	p No.:	
If you are not a	member, please list name and	l membership numl	per of the immediate	family living relative	below:
ir you are not a	memoer, preuse not name une	memoersmp nume	or or the minimum :	iuming nymg reiumve	0010 111
	Name		Relationship	Membership Nu	mber
Lattest that the	ahove name is a member in or	ood standing of			
Tattest that the	above name is a member in go	od standing of	Name and Num	nber of Council	
Financial Comm	40.00		Date: _		
Financial Secre	tary				
Have you been	accepted or presently enrolled	l at a Catholic Coll	ege/University?	() yes () no
If yes, which Ca	atholic College/University:				
Catholic Colleg	ge/University Address:				
Cathone Coneg	e/ oniversity / iddress				
Doon of Admiss	sions:		Tal M	0.:	
			Tern	o	
If no, which Ca	tholic College/Universities ha	ve you applied?			
					

SUBMIT RESUME OR ANSWER THE FOLLOWING QUESTIONS List High Schools/Preparatory schools attended: SCHOOL ADDRESS

DATES		PENT	DED
DAIES	AI		リトリナ

In answering the following questions, please indicate the (1-Freshman, 2-Sophomore, 3-Junior, 4-Senior)	he years involved:	
1. In what school activities (other than sports) have y	ou participated?	
2. In what organizations outside of school have you b	peen involved?	
		_ _
3. What offices have you held?		
4. What prizes/honors/awards of a scholastic, literary	, scientific, or other nature have you received?	_
5. What varsity sports have you participated, if any?		
Father's Name	Mother's Name	
Living () yes () No	Living () yes () no	

Father's Address	Mother's Address		
Street and Number	Street and Number		
City/State/Zip	City/State/Zip		
Occupation	Occupation		
Employer	Employer		
List names and ages of your sisters and brothers, if any			
ESSAY QUESTION: What values do you wish to gain to			
successful? Minimum 200 words (If typed use double sp Due Date NLT Close o	ace, and you may use separate attached sheets of paper) of Business April 1, 2023.		
I attest that the information in the scholarship application is	s accurate and true.		
Signature of Applicant	Date:		
	Date:		
Signature of Knights of Columbus Relative (if applicant is	s not a K of C member)		