

# Knights of Columbus; Council 4232

## 2024 High School Graduates Scholarship Application Form

### Applicants Personal Information:

Name \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Family Information:

Fathers Name \_\_\_\_\_ K of C Member? \_\_\_\_\_

Mothers Name \_\_\_\_\_

Parish \_\_\_\_\_

### Statement of Authorization:

I hereby acknowledge that the information contained in this application is true and correct. I understand and agree that any scholarship award is applicable if the applicant is officially accepted by an accredited college or university as a full-time student.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

The Knights of Columbus will award a check to the college or university in which the applicant is enrolled. Failure to register for the required full time course load (12 credit hours minimum) will cause the awarded amount to be returned to the Knights of Columbus, following the fall registration period.

Application Data:

High School \_\_\_\_\_

Test Scores: ACT \_\_\_\_\_ SAT \_\_\_\_\_ or list date Taken

Cumulative GPA \_\_\_\_\_

List: awards, honors, offices, achievements, and extracurricular activities in which you were involved by class year.

---

---

---

---

---

---

---

---

List the College or University you plan to attend and the academic interest you intend to pursue. Also, discuss your career goals. (You can attach separate sheet if you wish)

---

---

---

---

---

---

---

---

List any Parish Activities (focus on most recent activities include year)

---

---

Include any letters of recommendation or any other information you feel would be helpful.

Completed Application Due April 5, 2024

**Mail to:**

Knights of Columbus Council 4232  
Scholarship  
4840 Shattuck  
Saginaw, Michigan 48603

**Or Email to** [jczolgosz@aol.com](mailto:jczolgosz@aol.com)

Questions can be directed to Jim Czolgosz phone or text to 989-245-4233.