

KNIGHTS OF COLUMBUS

Council #6386 - Scholarship Application

Non-repayable grants are available to ALL St. Rose of Lima Parishioners and to ALL dependents and grandchildren of members of St. Rose Council #6386 (K of C) who qualify for financial assistance. Please answer all questions.

Eligibility: St. Rose Parishioner Child/Grandchild of Council Member — Member Name:

Applicant Information

Your Name

Date of Birth

Home Address

*College (Undergraduate Only)

Email Address

Accepted? Y/N

Phone Number

Major

School you plan to attend

Name of Present School

What Year Expect to Graduate?

Family Financial Information

Father's Name

Mother's Name

Employer

Employer

Address

Address

Annual Income (Earned/Unearned)

Annual Income (Earned/Unearned)

\$

\$

Student Financials

MONIES OUT (Expenses)	MONIES IN (Resources)
Tuition: \$ _____	Grants: \$ _____
Room/Board: \$ _____	Scholarships: \$ _____
Fees: \$ _____	State of ____ Tuition Aid: \$ _____
Books/Equipment: \$ _____	Pell Grants: \$ _____
Laundry: \$ _____	Stafford Loans: \$ _____
Entertainment: \$ _____	Perkins Loans: \$ _____
Transportation: \$ _____	NJ Class Loans: \$ _____
Work Study: \$ _____	Relatives/Friends/Welfare: \$ _____
Other: \$ _____	Other: \$ _____
TOTAL MONIES OUT: \$ _____	TOTAL MONIES IN: \$ _____

Student Academic Information (High School Students)

To Be Completed by Guidance Counselor

High School

Graduation Year

GPA	Class Rank / Class Size	ACT Score
SAT Math	SAT Verbal	SAT Writing

Activities / Leadership / Honors (List/Describe below)

Guidance Counselor (Name/Signature)

Date

** College Students or Re-Applicants Must Attach Latest Semester Grades

Essay Requirement

One of the Four Principles that serve as a foundation for the Knights of Columbus is **Charity**. Please describe your service to the St. Rose of Lima Parish and if you are a college student – describe your Community Service activities at your college/ university.

(Write or Attach Essay below - continue on extra sheets if necessary)

Final Certification & Submission

Factors not mentioned on this application which we should know about?

Prior Awards: Have you received a ST. ROSE COUNCIL #6386 Scholarship Award in prior years? Yes No
Amount: \$ _____ Year(s): _____

We certify that the information provided is complete and correct. Submitted for the Scholarship Committee to determine suitability for an award.

Signature of Student

Signature of Parent/Guardian

Return by July 11, 2026 to: Peter B. Quinn, PGK, Scholarship Committee
231 Baltusrol Avenue, Springfield, NJ 07081 | PBQ1@comcast.net | (973) 809-0494