

**KNIGHTS OF COLUMBUS**  
**ST. THOMAS AQUINAS COUNCIL #7382**  
**EDUCATIONAL SCHOLARSHIP APPLICATION 2019-2020**

**GUIDELINES:**

1. Applicant must meet all qualifications for, and be accepted by an institution of higher learning as defined in #2 (below).
2. The Educational Scholarship money must be used to pay for education in a university, college, junior college, technical school, business school or seminary. The selection of the institution is the student's choice. The Educational Scholarship money will be paid to the student.
3. The applicant must be a Knight of Columbus in good standing of Council #7382 or the wife, child, dependent or grandchild of a member in good standing of Council #7382. Survivors of deceased Knights are eligible.

=== OR ===

The applicant must be a member of a Registered Family at St. Thomas Aquinas Catholic Church.

Note that applicants associated with the Knights of Columbus will be considered for a wider range of scholarships.

4. Recipients will be selected by the Scholarship Fund Committee. Scholarships will be awarded based on merit and/or need.
5. The Committee has the right to waive #3 (above) if deemed appropriate.
6. **This application form must be complete, all instructions followed and all required materials submitted by 30 April 2019. Late or incomplete applications or applications not following the guidelines will be disqualified.**

**Part 1: (To be completed by Applicant. Be sure to include a valid mailing address. Notify the Scholarship Committee if there is an address change after the application is submitted.)**

Name \_\_\_\_\_  
(Last) (First) (Middle) (Date)

\_\_\_\_\_  
(Address) (Apt.) (City) (State) (Zip Code) (Phone)

I hereby make this application for an Educational Scholarship to be used to assist with my educational expenses while attending the following academic institution:  
\_\_\_\_\_ during the term \_\_\_\_\_ (e.g., Fall, 2019).

Name of Parent(s) or Guardian(s):

\_\_\_\_\_  
\_\_\_\_\_  
(Address) (Apt.) (City) (State) (Zip Code) (Phone)

Father\_\_\_\_/Guardian\_\_\_\_/Applicant\_\_\_\_/Grandparent\_\_\_\_\_ is a member of Knights of Columbus Council #7382 or the Columbian Squires.

Name of K.C. Member: \_\_\_\_\_

Other scholarship(s)/grant(s) and amounts awarded to the applicant: \_\_\_\_\_

Names and ages of brothers and sisters supported by the family: \_\_\_\_\_

Father/Guardian's Occupation: \_\_\_\_\_

Mother/Guardian's Occupation: \_\_\_\_\_

**Part 2: (To be completed by Applicant.)**

If you are just beginning your studies at an institution of higher learning, **attach or have mailed directly to the Committee a copy of your high school transcript (or GED) and SAT or ACT test scores.**

If you are currently attending an institution of higher learning, attach or have mailed directly to the Committee a copy of your current transcript from that institution.

**Part 3: (To be completed by Applicant.)**

1. Attach or have mailed directly to the Committee a letter of recommendation from one person (e.g., priest, teacher, employer, K.C. member), with contact information, which best substantiates your situation for "Academic or Leadership Potential."

2. Also, if you are just beginning your studies at an institution of higher learning, **attach a copy of your acceptance letter from that institution.**

**Part 4: (To be completed by Applicant.)**

Attach a statement, in 300 words or less, **outlining your needs, personal attributes, goals and accomplishments and how receipt of this scholarship will impact the pursuit of your education.**

**Part 5: (If applying on the basis of STA Parish membership, skip Part 5 and go to Part 6.)**

**To be completed by the Grand Knight of Council #7382.**

According to the Membership Rolls of the Knights of Columbus Council #7382 this applicant is, or is associated with, a Member in Good Standing of the Council as defined in Guideline #3.

Certified by \_\_\_\_\_ (Date)  
(Grand Knight Signature)

If the applicant is a Columbian Squire (or former Columbian Squire) the Grand Knight is to complete the following statement:

I, \_\_\_\_\_, Council #7382, certify that this applicant is presently  
(Grand Knight Signature)  
(or was formerly) an active member of Squire Circle Number \_\_\_\_\_.

**Part 6: (If applying on the basis of K.C. association, skip Part 6 and go to Part 7.)**

**To be completed by Father Santy Kurian or the STA Business Manager or Secretary.**

According to the St. Thomas Aquinas Parish Records, the \_\_\_\_\_ family is currently registered with the parish.

Certified by \_\_\_\_\_  
(Signature) (Title) (Date)

**Part 7: Submit the application and all required materials by April 30, 2019 to:**

Dr. James Stark  
K.C. Council 7382 Scholarship Fund Committee  
P. O. Box 1705  
Alief, TX 77411

Items submitted by mail must be postmarked no later than April 30, 2019.

**Part 8: (To be completed by Applicant.)**

I declare that the above statements and attachments are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
(Applicant Signature) (Date)

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**Part 9: (To be completed by the Scholarship Fund Committee.)**

Approve \_\_\_\_\_ Name of Scholarship Awarded \_\_\_\_\_

Reject \_\_\_\_\_ Amount Awarded \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(Committee Signatures) (Date)