



Knights of Columbus - Aptos Resurrection Council #9580

Academic Scholarship Application for High School Seniors
who are members of the Resurrection Catholic Community

Application deadline: MAY 1st Please type or print all information except for signatures.

APPLICANT DATA

Name _____ Date of Birth _____

Home Mailing Address _____
Address City State Zip Code

Telephone (_____) _____ Cell Phone (_____) _____

E-Mail address _____

High School: _____ Graduation Date: ___/___/___

PARENT OR GUARDIAN INFORMATION

Name _____

Home Mailing Address (if different from above) _____

Telephone (_____) _____ E-Mail address _____

COLLEGE INFORMATION

In what field of study are you interested? _____

What is your career or professional goal? _____

Which college or school are you most likely to attend? _____

OTHER INFORMATION

Do you confirm that you are an active member of Resurrection Parish? _____ yes /no.

Have you been involved in the Resurrection Youth Group? _____ yes*/no.

Are you or is a close relative a member of Aptos Resurrection Council, K of C? _____ yes*/no.

Are you going to attend a Seminary or a religious house of formation? _____ yes*/no.

Do you have a special need for financial assistance? _____ yes*/no.

** If the answer to this question is "yes," please use an additional sheet of paper to provide details.*

SCHOOL ACTIVITIES - Describe the high school sports, organizations and activities in which you have participated. *If needed for any topic, you may use an additional sheet of paper to provide details.*

Describe the **COMMUNITY SERVICES / VOLUNTEER ACTIVITIES** in which you have participated.

List any High School academic **HONORS/AWARDS** you have received.

Describe your **WORK EXPERIENCE?**

ATTACH AN ESSAY - On a separate sheet of paper please submit a one-page **essay** that gives us some insight into who you are and what you want to be. Tell us about yourself. You can write about your experiences, goals, qualities, interests, all of the above, none of the above, or whatever you want to communicate.

ATTACH AN UP-TO-DATE OFFICIAL TRANSCRIPT AND RECENT PHOTO.

I hereby authorize the release of this Scholarship Application and my academic records to the Scholarship Committee. I certify that all information provided is true to the best of my knowledge.

Applicant's signature _____ Date _____

Parent's Signature _____ Date _____

The applicant and at least one parent or guardian must sign for this scholarship application to be evaluated.

Completed applications and attachments may be delivered to the Parish office, or mailed to:
Knights of Columbus Council #9580
PO Box 2322
Aptos, CA 95001-2322