



# St. Francis of Assisi Council 4401 High School Scholarship



Dear Applicant:

St. Francis Council is happy to offer a \$1,000 scholarship for the 2024 / 2025 academic year. This scholarship award is payable to a parochial (Catholic) school for the purpose of paying tuition to the parochial high school that the selected student plans to attend.

In order to be considered for the scholarship, your application must be completed properly. Please take the time to review the requirements listed in the instructions, complete the information in the attached scholarship application, and review the attached checklist.

- You must attach two letters of recommendation from people not related to you.
- You must submit a copy of your 7<sup>th</sup> grade and the first three quarters of your 8<sup>th</sup> grade school transcript.
- Please download the application document and fill out the fillable sections of the application which are indicated by the gray boxes.
- Please make sure to print out your application single sided
- **Mail the application and all required documents per the checklist at the end of the application to the address below on or before but NO LATER THAN May 15, 2024.**
  - Our Lady of Sorrows Church  
23815 Power Road  
Farmington, MI 48336  
ATTN: Knights of Columbus - Scholarship Submission
- One scholarship winner will be announced at the end of May.

**ELIGIBILITY RULES:**

1. **Must be a child or grandchild of an active Our Lady of Sorrows Parishioner and / or a member in good standing of St. Francis Knights of Columbus.**
2. Must be a member of the St. Francis Knights of Columbus and / or Our Lady of Sorrows Parish for a minimum of (1) one year.
3. The applicant for the scholarship must be in the eighth grade and must be meeting graduation requirements.
4. The scholarship must be used for the academic year for which it is awarded, and the selected student must be accepted at a parochial high school.
5. If a recipient is no longer able to attend the parochial school for any reason, the expectation will be that the remaining scholarship award monies, if any, be returned to the Knights of Columbus St. Francis Council #4401 Scholarship Fund.
6. At the time of application, recipient must have a minimum grade point average of 3.0 during the entire elementary school experience.

KNIGHTS OF COLUMBUS COUNCIL SCHOLARSHIP ADMINISTRATOR FIELD ONLY

Application# \_\_\_\_\_ Date Received \_\_\_\_\_ Administrator Initials \_\_\_\_\_



# St. Francis of Assisi Council 4401 High School Scholarship



1.	Last Name:	First Name:
2.	Mailing Address	
	Street:	
	City:	State: ZIP:
3.	Phone Number:	
	Email address:	
	Preferred Form of Contact:	
4.	Date of Birth: Month	Day Year
5.	Name of parent(s) or legal guardian(s):	
	Is the address the same as in question #2? (If no please include address below)	
	Street:	
	City:	State: ZIP:
6a.	Is your family an active member of Our Lady of Sorrows Parish (please check one): <input type="checkbox"/> Yes <input type="checkbox"/> No	
	If referred by a Knights of Columbus Council Member, please provide the member's name:	
	Relationship to referring Knights of Columbus Council Member and / or active member of Our Lady of Sorrows Parish (please check one):	
	<input type="checkbox"/> Son <input type="checkbox"/> Daughter <input type="checkbox"/> Grandson <input type="checkbox"/> Granddaughter	
6b.	Please describe your family's activities (i.e. time, talent, treasure) on behalf of Our Lady of Sorrows Parish. This could include contributions to the parish and/or participation in parish sponsored programs.	
7.	School Name:	
	School Address:	
	Expected School Graduation Date:	
	<i>*If you attended another school for 7<sup>th</sup> or 8<sup>th</sup> grade, please include those transcripts as part of the application.</i>	

KNIGHTS OF COLUMBUS COUNCIL SCHOLARSHIP ADMINISTRATOR FIELD ONLY

Application# \_\_\_\_\_ Date Received \_\_\_\_\_ Administrator Initials \_\_\_\_\_



# St. Francis of Assisi Council 4401 High School Scholarship



8.	Cumulative Grade Point Average (G.P.A):	Based on a 4- or 5-Point Scale:
	High School Placement Test Score <i>(if applicable)</i> :	

9.	List any academic honors, awards and membership activities:
----	---

10.	List your hobbies, outside interests, extracurricular activities and school related volunteer activities:
-----	---

11.	If you have decided on the parochial high school you will attend, please list the school's name:
	If not, please list your top other parochial school choice:

12.	Please indicate what will be your top three areas of interest in high school.
-----	---

13.	On a separate sheet please provide a typed essay (not more than 500 words) writing about a specific time in your education thus far when you did not experience success. Describe what you learned from that situation, and how in the long run it made you a better and more complete person.
-----	--

14.	Please attach two (2) letters of recommendation from people who are not related to you.
-----	---

KNIGHTS OF COLUMBUS COUNCIL SCHOLARSHIP ADMINISTRATOR FIELD ONLY

Application# \_\_\_\_\_ Date Received \_\_\_\_\_ Administrator Initials \_\_\_\_\_



# St. Francis of Assisi Council 4401 High School Scholarship



## Statement of Accuracy for Student

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent, that if chosen as a scholarship winner, my picture may be taken and used to promote the Knights of Columbus Scholarship Program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to the Knights of Columbus Scholarship policy, I will try to be present at any awards ceremony and/or reception to receive my scholarship award.

I hereby understand that if chosen as the scholarship winner, it is my responsibility to submit to the Knights of Columbus Scholarship Committee, no later than August 15, 2024, a certificate of enrollment for the fall semester, which includes your Student ID number and Financial Aid Office address.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

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

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

KNIGHTS OF COLUMBUS COUNCIL SCHOLARSHIP ADMINISTRATOR FIELD ONLY

Application# \_\_\_\_\_ Date Received \_\_\_\_\_ Administrator Initials \_\_\_\_\_



# St. Francis of Assisi Council 4401 High School Scholarship



## Statement of Support by Guidance Counselor

I hereby affirm that this application meets the criteria set forth by this scholarship program and support submission of this application to Knights of Columbus Scholarship Program.

Name of Guidance Counselor: \_\_\_\_\_

School Name: \_\_\_\_\_

Contact Information (email and phone number): \_\_\_\_\_

---

Signature of Guidance Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

KNIGHTS OF COLUMBUS COUNCIL SCHOLARSHIP ADMINISTRATOR FIELD ONLY

Application# \_\_\_\_\_ Date Received \_\_\_\_\_ Administrator Initials \_\_\_\_\_



# St. Francis of Assisi Council 4401 High School Scholarship



## Application Checklist

(Please Initial each field and attach with application)

\_\_\_\_\_ Completed application

\_\_\_\_\_ Print and sign application and checklist

\_\_\_\_\_ Essay on separate sheet of paper

\_\_\_\_\_ Two letters of recommendation

\_\_\_\_\_ School transcript (for 7<sup>th</sup> grade and the first three quarters of 8<sup>th</sup> grade only)

\_\_\_\_\_ Guidance Counselor signature

\_\_\_\_\_ Parent or Guardian signature

KNIGHTS OF COLUMBUS COUNCIL SCHOLARSHIP ADMINISTRATOR FIELD ONLY

Application# \_\_\_\_\_ Date Received \_\_\_\_\_ Administrator Initials \_\_\_\_\_