KNIGHTS OF COLUMBUS COUNCIL 1230 LADIES AUXILIARY SCHOLARSHIP

TO ST. PIUS X HIGH SCHOOL FESTUS MO

The Knights of Columbus Ladies Auxiliary Council 1230 will award two (2) \$500.00 Scholarships to St. Pius X High School Festus Mo for the Academic year 2023-2024. One scholarship will go to an incoming Freshman for the 2023-2024 & the other scholarship will go to a current St Pius X student who will be a sophomore, junior or senior for the 2023-2024 academic year.

ELIGIBILITY: To be eligible for this scholarship the applicant must be a student enrolling and attending St. Pius X Festus Mo for the academic year of 2023-2024.

Payments will be made to St. Pius X Festus, in the name of the winner, after proof of successful enrollment in good standing is provided to the Scholarship Committee.

The Award Committee will be made up of members in the Knights of Columbus Council 1230 Ladies Auxiliary.

All applications must be received no later than June 2, 2023. Any incomplete applications will not be considered. Please mail all completed applications with transcripts and educational certifications to:

Knights of Columbus 1230

Ladies Aux. Attn Cheryl Beffa

316 N. Adams

Festus, MO 63028

APPLICATION FOR KNIGHTS OF COLUMBUS COUNCIL 1230 LADIES AUXILIARY SCHOLARSHIP

++++ USE THIS FORM FOR 2023-2024 SCHOOL YEAR ++++

APPLICATION MUST BE RECEIVED BY June 2, 2023

Full Name:						
	Last		First		Middle	
Home Address	S:					
City:			State		Zip:	
Date of Birth:				Male	Female	
	Month	Day	Year			
Name of Parer	nt(s)/Guard	ian(s):				
Address of Parent(s)/Guardian(s) if different from above:						
Home Phone N						
Parent(s)/Guardian(s) Phone number if different from above:						
Parent(s)/Gua	rdian(s) E-n	nail Addr	ess:			
Applicant's Sig	nature:					
Parent(s)/Gua	rdian(s) Sig	nature:_				

ESSAY: Give us your Top Four Things that have shaped who you are as a person – 2 positive and 2 negative. For each "thing" write a short paragraph describing how it has impacted you. Keep total essay to 300 – 500 words. You can use this sheet or attach your essay (on a					
separate piece of paper) to the back of this application.					

Αp	pli	icants	Name:				

KNIGHTS OF COLUMBUS SCHOLARSHIP INFORMATION EDUCATIONAL CERTIFICATION

This form is to be completed by an authorized Institutional Representative. A copy of the student's transcript is required.

The above referenced stude	ent attends:				
Address:	City:	State:	Zip:		
Student's GPA:	Class Rank:	of			
Grade scale being used to c	lassify:				
To the best of my knowleds	ge, the above info	ormation is correct as	of this date.		
Y N					
If no explain:					
Print Name and Title:					
Signature: Date:					
Student's Parent(s)/Guardi	an(s) permission	to release the above	information:		
Print Name:		Signature:			
Date:					

DO YOU HAVE A RELATIVE THAT IS KNIGHTS OF COLUMBUS? Y	S A CURRENT MEMBER WTH THE N					
IF YOU ANSWERED YES TO THE ABOVE QUESTION:						
Name:						
RELATIONSHIP:	COUNCIL NUMBER:					