



Knights of Columbus

Michael James-Fieder Council #7048

PO Box 385 Mukwonago WI 53149

Specific Scholarship Criteria and an application form can be viewed at
www.facebook.com/MukwonagoKnightsOfColumbus.

High School Graduate and Continuing Education SCHOLARSHIP APPLICATION

(Application must be filled out completely)

*(Application should be submitted by **June 23, 2018**)*

Type or Print Clearly

GENERAL INFORMATION

Name: _____

Home Address: _____

Graduating High School: _____

Telephone (Home): _____ (Cell): _____

Date of Birth: _____ Age: _____ Gender: M F

Email Address: _____

Is your family a member of a Church? (check one)

Yes No

Are you a child or grandchild of an active and in good standing Knights of Columbus

member? Yes No

If yes, relationship to member: _____

ACADEMIC INFORMATION

Name of college, university or trade school you plan to be attending:

Chosen Major: _____

ESTIMATED EDUCATION EXPENSES PER YEAR

Tuition & Labs: _____ Room & Board: _____
Books: _____ Other: _____

CAREER GOALS

On a separate piece of paper, write a brief explanation of your career goals and objectives for the next five years.

ELIGIBILITY

To be eligible for a scholarship from the Knights of Columbus, Michael James-Fieder Council #7048 Fund you must:

1. Submit a completed application form.
2. Be a graduating high school senior attending college in fall or continuing student of 2018.
3. Demonstrate in essay form financial need.
4. We will require a current transcript for an associate or bachelor program.
5. Be accepted or enrolled at an accredited college, university or trade school within the United States at the time of application (trade school should equal a two-year associate program).
6. Be a United States citizen or in the United States on a Student Visa.
7. Be enrolled full-time
8. Have a **2.0 GPA** or higher at completion of first semester, transcript is required for review.

NOTIFICATION

- Money will be awarded after review of first semester transcripts.
- Winners to be notified by July 14, 2018.

CERTIFICATION

I certify that the information provided is true and complete. I understand that false or incomplete information may result in forfeiture of eligibility or scholarship, if selected.

Signature: _____ Date: _____

Return complete application and supporting material postmarked by June 18, 2018 to:

**Knights of Columbus
Michael James-Fieder Council #7048
Scholarship Programs
P.O. Box 385
Mukwonago, Wisconsin 53149**