KNIGHTS OF COLUMBUS SCHOLARSHIPS Mid-Island Council #3842

Print the form out, complete it, sign, and return it <u>along with your transcripts</u> to: Financial Secretary, Knights of Columbus, P.O. Box 426, Nanaimo, B.C. V9R 5L3

NAME:		
ADDRESS:		POSTAL CODE
SCHOOL ATTENDED THIS YEA	AR:	GRADE OR YEAR:
PART TIME STUDENT	FULL TIME STUDENT W	HAT COURSE DO YOU PLAN TO FOLLOW
IN YOUR FURTHER TRAINING	77	
DO YOU HOLD A DEGREE?	IF YES, WHAT?	
TO WHAT PARISH DO YOU BE	ELONG?	-
DO YOU HAVE A CLOSE RELA	TIVE WHO IS A MEMBER OF THE	KNIGHTS OF COLUMBUS?
IF YES, WHO?	COUNCIL NO	
list of parish and community	activities that you have participa	tter to describe your situation. Include a ited in during this year.
RULES AND REQUIREM 1. Applications must be made B.C., V9R 5L3.		of Columbus, P.O. Box 426, Nanaimo,
2. Completed official application 30, of the current year.	tions must be in the hands of the	Financial Secretary not later than June
(college, university, vocation	al school) are eligible. Members d	ary institution of learning or training of this year's grade 12 graduating class ondary school's awards committee.
might include first semester i	marks or last year's transcript. No ou are not including a transcript,	st accompany application form. This o application will be considered unless the committee will not look at your
5. Priority will be given first t Catholic students within the		rs of the K. of C. councils; second to
post-secondary certificate. If		s their first bachelor's degree or first e making a career change you MUST d consider your application.
 Date	 Signature	 Telephone #