**Paterson Federation Knights of Columbus College Scholarship Application**

The applicant should complete Parts I, II & III and mail, with 2 letters of recommendation from non- family members (e.g. clergy, teacher, employer, etc.) who can attest to the applicant’s character. Your Guidance Counselor must also complete and mail Part IV. This information must be received by **May 21st, 2022** to be eligible for consideration. Please mail all documentation to:

**Frank J. Wos PGK**

**8 Williams Rd**

**Landing, NJ 07850**

**Criteria for Consideration:**

1. Must be a child, grandchild, foster child or adopted child of a current or deceased member of a Council in good standing of the Paterson Federation Knights of Columbus.
2. Must be a graduating high school senior.
3. Must complete an application and **provide all requested information** by the designated date listed above.
4. Must be accepted and planning to attend a Two or Four year college or university, or post secondary trade or technical school in the Fall Term 2022.

**PART I**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HIGH SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CLASS OF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**My Father/Grandfather/Foster Father is (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** and he is a member of **Council**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the Paterson Federation.**

**PART I – Continued**

**WHICH COLLEGES/UNIVERSITIES,POST SECONDARY TRADE OR TECHNICAL SCHOOLS HAVE YOU BEEN ACCEPTED BY AND WHICH DO YOU PLAN TO ATTEND?**

**LIST YOUR COMMUNITY INVOLVEMENT/SERVICE ACTIVITIES:**

**LIST YOUR HIGH SCHOOL ACTIVITIES:**

**LIST ANY EMPLOYMENT(IF APPLICABLE):**

**PART II**

**TELL US SOMETHING ABOUT YOURSELF (SOME QUALITY, SKILL OR ABILITY THAT YOU ARE PARTICULARLY PROUD OF) THAT DEFINES BEST WHO YOU ARE. ALSO TELL US WHY YOU ARE CONTINUING YOUR EDUCATION. FEEL FREE TO ADD ADDITIONAL PAGES IF NEEDED. LIMIT OF 250 WORDS USING MS WORD OR ANY OTHER PROGRAM.**

**PART III**

**I HAVE COMPLETED ALL OF THE ABOVE REQUIRED INFORMATION MYSELF. IT IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. PART II REPRESENTS MY ORIGINAL WORK.**

**APPLICANT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I HAVE READ THE ABOVE AND AGREE WITH THE INFORMATION PROVIDED BY MY SON/DAUGHTER.**

**PARENT/GUARDIAN SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PART IV**

**To Guidance Counselor:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (applicant name)** is applying for consideration for a Paterson Federation Knights of Columbus Scholarship. You are authorized to provide the information requested to the Federation Scholarship Committee.

**Applicant Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent / Guardian Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is currently a Senior and member in good standing of the Graduating Class of 2021.

Grade Point Average as of last completed marking period \_\_\_\_\_\_\_\_\_\_\_\_\_

S.A.T. Scores \_\_\_\_\_\_\_\_\_\_\_\_\_ Critical Reading \_\_\_\_\_\_\_\_\_\_ Math \_\_\_\_\_\_\_\_\_\_\_\_ Writing

or

ACT Composite Score \_\_\_\_\_\_\_\_\_\_\_\_\_

**Guidance Counselor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Guidance Counselor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HIGH SCHOOL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This information must be received by May 21st, 2022 Please mail to:**

**Mr. Frank J. Wos PGK**

**8 Williams Road**

**Landing NJ 07850**

Email: gkfjw20142016@yahoo.com