

Rhode Island State Council  
Knights of Columbus



**2021 SECONDARY CATHOLIC SCHOOL SCHOLARSHIP APPLICATION**

**REQUIREMENTS**

1. Applicant must be the son, daughter, grandson or granddaughter of a member in good standing of the **Third Degree** of the Knights of Columbus in Rhode Island or the son, daughter, grandson or granddaughter of a deceased member of the **Third Degree** of the Knights of Columbus at the time of his death. *If the applicant's father is eligible to be a member of the Knights of Columbus, and is not, a grandfather **is not** eligible to sponsor the applicant.*
2. Applicant must be attending, or will attend, a Catholic High School (Grades 9-12) for the 2021-2022 school year. Although multiple applications may be submitted from the same family, only one award will be granted to each family per academic year.
3. ALL APPLICATIONS MUST BE FULLY COMPLETED. Incomplete applications, or applications missing supporting documentation, will not be considered. Any application received after, or postmarked, after the due date will not be considered. **Electronic versions of applications sent via email or fax will not be accepted.**

Applicant's Name \_\_\_\_\_ AGE \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number (H) \_\_\_\_\_ (Cell) \_\_\_\_\_

Sponsor's Name & Membership Number \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_ Father \_\_\_\_\_ Grandfather

Sponsor's Council and Council Number

What school and grade will the applicant be in for the 2021-2022 school year?

**Estimated Tuition Cost for the Applicant for the Upcoming School**

**Year** \_\_\_\_\_

**Total Number of Applicant's Siblings Living at Home** \_\_\_\_\_

**Total Number of Applicant's Siblings also attending a Catholic Elementary or Catholic High School** \_\_\_\_\_

**Total Adjusted Gross Income as Reported on the 2020 Federal Tax Form 1040 or 1040A**

*(Attach form with Social Security Number blacked out)* \_\_\_\_\_

**Sponsor's Printed Name** \_\_\_\_\_

**Sponsor's Signature** \_\_\_\_\_

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

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**RETURN FORMS AND REQUIRED DOCUMENTS BY  
SATURDAY APRIL 17, 2021**

*(Please note that this is a HARD deadline. No applications will be considered if received, or postmarked, after the due date. **DO NOT** send the application via certified mail and/or signature required. The chairman will not go to the post office to pick up any application packets. **DO NOT** submit an electronic application packet via email or fax)*

**MAIL OR DROP OFF COMPLETED APPLICATION TO:**

Adam Scott  
221 Cindyann Drive  
East Greenwich, RI 02818  
401-226-3868  
\*Email: [ams0708@verizon.net](mailto:ams0708@verizon.net)

*\*Email is being provided for questions only, not to submit an application.. For any questions, only the applicant's sponsor (3<sup>rd</sup> Degree*

*Knight) should contact the Committee Chair. Family members of the applicant should not contact the Committee Chair*

*\*\*If dropped off at Committee Chair's House, please place application packet in the Monroe Dairy Box on the Front Porch*

*\*\*\*The final selection of award winners, by the committee, is final. Decisions will not be discussed with any applicant, family member sponsor, or council member as to why an applicant did or did not receive and award.*