

ST. THOMAS MORE KNIGHTS OF COLUMBUS COUNCIL 8488

PAUL HINKIN MEMORIAL SCHOLARSHIP



Eligibility: Two \$1,000 scholarships will be awarded. One scholarship will be awarded to a currently active member of St. Thomas More Council 8488 or an immediate family member (child, spouse, or grandchild), or an immediate family member of any deceased member of the council provided they were a member in good standing at the time of their death. The other scholarship may be available to a member of any family registered in the parish. Previous recipients are not eligible. **Applications must be received by April 6, 2018.**

NAME: _____

HOME ADDRESS: _____

TELEPHONE: _____ **AGE:** _____

Email: _____

My father or grandfather is a current or deceased member of the St. Thomas More K of C:

Yes _____ No _____

SCHOOL:

A. Year and school you presently attend:

High school: _____ Grade: _____

Or

Name of college/trade school: _____ Year: _____

B. If in college, high school attended: _____ Graduation date: _____

C. High school grade point average: _____ out of _____ points

D. ACT composite score: _____ or SAT composite score: _____

E. If in college, grade point average: _____

F. If not currently enrolled, school last attended: _____ Year: _____

FAMILY INFORMATION (*fill out only the appropriate sections*)

A. For students who are still dependents (*currently in high school or college*):

Father's Name: _____

Address: _____

Occupation: _____

Mother's Name: _____

Address if different: _____

Occupation: _____

B. Married Student:

Your Occupation if currently employed: _____

Spouses name: _____ Occupation: _____

C. Legal Guardian if other than a parent: _____

D. Number of brothers/sisters (*for dependent students only*): _____ Ages: _____

E. Number of children (*for married students only*): _____ Ages: _____

DESCRIBE YOUR GOALS IN PURSUING OR CONTINUING A COLLEGE

EDUCATION. (If known, indicate the college or trade school you plan to attend or are attending and major.)

FINANCIAL NEED

A. Explain your need for financial assistance to continue your college education during the next year and describe your plans for meeting this financial need.

B. List anticipated college costs for the next year.

Tuition \$ _____ Room \$ _____ Lab fees \$ _____ Books \$ _____

Other \$ _____ (explain: _____) **Total \$** _____

C. Will you have any brothers, sisters or children attending college during the next year?

Yes _____ No _____

If yes, list the college they are attending and what year they are in.

D. List other scholarships you will be receiving and the amounts:

1) _____

2) _____

3) _____

4) _____

SUMMARIZE YOUR PARTICIPATION IN ACTIVITIES AND HONORS RECEIVED IN:

A. High School or College

B. Church

C. Community

D. Special interests and hobbies

I have personally prepared this application and believe it to be correct.

Signature of Applicant _____ Date _____

Return applications to:

Attn: Scholarship Committee
St. Thomas More Knights of Columbus
2900 Kimball Ave
Manhattan, KS 66502