



DC Knights of Columbus
CHARITIES

2024 SCHOLARSHIP APPLICATION

DC Knights of Columbus Charities – the charitable arm of the District of Columbia Knights of Columbus State Council, is pleased to announce that we are offering up to four (4) \$500 scholarships for 8th grade students going into 9th grade or current students in the 9th, 10th, or 11th grades moving into the next grade level.

Applicants **must be residents of the District of Columbia** and be attending, or will attend, a private **Catholic** secondary school.*

Applications and related materials must be received no later than **January 19, 2024** to be considered. **Decisions will be made in February 2024.**

Please mail applications and related materials to:

DC Knights of Columbus Charities
Scholarship Committee
P.O. Box 90884
Washington, DC 20090-0884

Or Submit via email to: charities@dcknights.org

You can also submit this application completely online at:
charities.dcknights.org/scholarships

For more information, please contact: charities@dcknights.org, your local Knights of Columbus Council, or visit charities.dcknights.org.

**If a designated scholarship winner chooses not to attend a Catholic secondary school for the 2024-2025 school year, the scholarship will be considered revoked and given to another applicant.*

APPLICATION FOR THE DC KNIGHTS OF COLUMBUS CHARITIES SCHOLARSHIP

Privacy Act Advisory Statement

The Privacy Act of 1974 (P.L. 93.579) requires that you be given certain information in connection with this request for data. Pursuant to the requirements of the Act, please be advised:

1. The authority for the collection of this data is Public Law 93-642.
2. Submitting the information requested is voluntary.
3. The main purpose for which the data will be used is the selection of award winners for the DC Knights of Columbus Charities Scholarship.
4. Other routine uses of the data are for public affairs and press releases to news media.
5. Failure to complete the form will mean that you cannot be included among those candidates being considered for this scholarship award.

I. BIOGRAPHICAL QUESTIONNAIRE

The questions that follow are designed to collect information about your background, your interests and your plans. Answers to these questions will be used in connection with your application for this scholarship award and will be made available to the scholarship selection committee.

General Information (Please type or print)

1. _____
Applicant's full name: last, first, middle E-mail address
2. _____ M F
Date of birth: month, day, year Gender (Circle One)
3. _____
Permanent home address: number, st., city, zip code Tel. No.
4. _____
Parent(s) or legal guardian name
5. _____

_____ High School you will attend. (include address, state, zip code, and area code/telephone number)

The signee grants to DC Knights of Columbus Charities, its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize DC Knights of Columbus Charities, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that DC Knights of Columbus Charities may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

II. APPLICANT INFORMATION

Please provide information on the following topics. (Attach additional sheets of paper where necessary.)

1. Describe your involvement in civic, community, school, and/or religious activities. Please indicate the activity, date(s) of your direct, active involvement, and your role or actions.

- Can take the form of a list or resume
- Include time and length of involvement (i.e. number of years, days a week, etc.)
- Include any awards or recognitions received

2. **Essay Topic:** As a District of Columbia student, what does this high school scholarship mean for you and future? In what ways will you benefit? In what ways might others benefit?

- 1-2 pages, 12pt font, single spaced

3. **Statements of Need (Optional):** Applicant MAY outline or submit statement/evidence that the committee can use to evaluate evidence of financial need.

4. Please have your school forward an official transcript of your grades to the mailing address or email address listed on page 1.

Signature: _____ Date: _____

III. RECOMMENDATIONS

At Least Two (2) Recommendations are required from any combination of the following:

- Teacher
- Community leader
- Coach
- Church leader
- Other non parent/relative

Parent or relative recommendations should not be submitted.

In the space below (or attached paper), please describe the applicant's qualifications for this award. Please include contributions to their school, church, or community.

Signature: _____ Date: _____