Knights of Columbus

St. Katharine Drexel Council #11177 1422 SW 3rd Avenue Cape Coral, FI 33991

Joshua Johnson Memorial Scholarship

1. Application Criteria:

Must be a member of St. Katharine Drexel parish, St. Andrew parish, or Our Lady of the Miraculous Medal parish, **OR**Must be a relative of a member of the Knights of Columbus (any Cape Coral council or Pine Island council).

- A. Be a graduating high school senior.
- B. Student must be planning to study at an accredited post-secondary institution.
- C. Must demonstrate superior academic performance as evidenced by the high school transcript (including SAT/ACT scores).
- D. Must show evidence of active involvement in school, community and parish activities.
- E. Financial need may be used as a determining factor.

2. Application Process:

- A. Submit completed application with all supporting documents to the address listed above. Completed applications and all supporting documents must be postmarked no later than **March 31, 2024**.
- B. The K of C scholarship committee will review applications.
- C. The committee will notify award winners. The scholarship is worth \$500 per academic year, renewable for up to 4 years.

3. Maintaining scholarship eligibility:

This scholarship is a renewable scholarship. Scholarship winners must maintain a 2.5 cumulative grade point average. If a student falls below the 2.5 cumulative gpa, they have the right to ask for reinstatement of the scholarship when the cumulative gpa returns to the 2.5 average. The scholarship is good only for the four calendar years from the date it is awarded. Proof of enrollment is required at the beginning of each year's fall term. Proof of gpa eligibility is required at the end of each spring term in the form of an official transcript. It is the **student's responsibility** to verify enrollment and verify the cumulative gpa by the dates provided each year by the scholarship committee. If the specified documents are not provided by the specified dates, it will be presumed that the student has vacated the scholarship.

APPLICATION

DATE:					
APPLICANT NAME :					
	(first)	(middle)	(last)		
ADDRESS :					
(number/street/city/zip)					
PHONE # :	DATE OF BIRTH :				
MEMBER OF WHICH CA	ATHOLIC PARIS	H?			
IS A MEMBER OF YOUR	R FAMILY A ME	MBER OF THE KNI	GHTS OF COLUM	IBUS ?	
IF YES, FAMILY MEMI	BER'S NAME _		CC	OUNCIL #	
NAME OF STUDENT'S H	HIGH SCHOOL	:			
COLLEGE/UNIVERSITY	YOU PLAN TO	ATTEND :			
INTENDED MAJOR :					
ACTIVITIES/ACCOMPLIS applicant's involvement/a		• •		lescribing the	
HIGH SCHOOL A Positions, awards		elude clubs, sports, earned.	extracurricular acti	vities, leadership	
		TIES : Describe an ommunity service a		vements,	
ACADEMIC INFORMATION transcript, including ACT a school contact person (transcript and/or verify school)	and/or SAT test e.g. guidance o	scores. In addition, counselor) who can	, please indicate in	the space below,	
SCHOOL CONTACT PER	RSON:				
(name)		(title)	(sch	ool phone #)	

BIOGRAPHICAL INFORMATION

(all information on this page will be kept confidential)

APPLICANT'S NAME :	
FATHER'S NAME :	
OCCUPATION/EMPLOYED BY :	
MOTHER'S NAME :	
OCCUPATION/EMPLOYED BY :	
BROTHERS/SISTERS	AGE
The applicant certifies that the information on the scholarship application	is true and accurate :
(signature of applicant)	(date)
HOME or CELL TELEPHONE NUMBER	
REMINDER : Be sure to include your statement of activities/accomplishm school transcript, including SAT and/or ACT test scores, when you submit committee will not consider incomplete applications. All applications must later than MARCH 31 , 2024 to the following address:	it your application. The

Knights of Columbus Scholarship Committee 1422 SW 3rd Avenue Cape Coral, Florida 33991

QUESTIONS? contact Mike Sushil at (239) 560-2454 or email MICHAELDSUSHIL@gmail.com