



# Knights of Columbus®

## Utah State Council



The Utah State Council of the Knights of Columbus is pleased to provide our annual scholarships. The scholarships were established through the vision of the Utah State Council and the Utah Fourth Degree assemblies of the Knights of Columbus. The purpose of the Utah Knights of Columbus Scholarships are to encourage and assist members, spouses of members, and children or legal guardianship of members with their expenses of continuing education at Colleges, Universities, or Trade & Vocational-Technical schools.

Scholarship awards are based on the candidate's academic records, extracurricular activities, community service, and other indicators of academic achievement, character, and leadership.

This single application is utilized for all four of the annual scholarships and award amounts vary based on which scholarships they are eligible to receive.

The scholarships: UT State Council Scholarship, Salt Lake Council 602 Scholarship, Dan Higgins Memorial Scholarship, and the Fourth Degree Patriotic Scholarship, together with the amount of the award are as stated below;

	Salt Lake Council 602 Scholarship	UT K of C State Council Scholarship	Dan Higgins Memorial Scholarship	Fourth Degree Patriotic Scholarship
Award Amount	\$2000	\$1500	\$3000	\$1500
Target App or Eligibility	Graduating High School this year.	Graduating High School this Year.	2 <sup>nd</sup> year or higher of post-secondary education	2 <sup>nd</sup> year or higher of post-secondary education

This scholarship application and supporting documentation should be submitted at the same time as a complete package, incomplete packages will result in disqualification. Additionally you will not be notified if the application is missing items. **DEADLINE FOR SUBMISSION OF APPLICATION PACKAGE must be received or postmarked no later than midnight on March 15<sup>th</sup>.**

### Scholarship Application Package Checklist

1. This application (pages 2-8), please make sure applicant name is entered on every page at the bottom.
2. School Transcript copy (either from High School if graduating high school or from current college)
3. Provide 3 letters of recommendation from persons not related to you (include their name, address, phone number). Suggested letters from Priest or Deacon, Teacher, Manager/Employer, someone that knows you personally.  
Letter from: \_\_\_\_\_ Letter from: \_\_\_\_\_ Letter from: \_\_\_\_\_
4. Provide a word-processed essay of 500 words or more (8 ½" x 11" paper, Times New Roman, Size 12 Font), describing "What are the duties of a Catholic citizen to God and country in today's society?" or "What are your educational goals, extracurricular and community activities, and your participation in family and church activities."



# Utah Knights of Columbus Scholarship Application



Submit application either by email to [dovcha@hotmail.com](mailto:dovcha@hotmail.com) (preferred method)  
or by mail to UT K of C Scholarship Committee, c/o Charles Dover Jr, 6170 Hathaway Street, Taylorsville, Utah 84123 Must  
be postmarked no later than March 15<sup>th</sup>.

## Biographical Questionnaire

This questionnaire is designed to collect information about your background, interests, college and career aspirations. Your answers to these questions will be reviewed by the Utah Knights of Columbus scholarship selection committee. The selection of scholarship recipients will be influenced by the completeness of responses and eligibility for each of the four scholarships.

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### Applicant Information

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

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### Your Education

1. Please select your current status: \_\_\_\_ High school senior \_\_\_\_ Post high school student (college/university/technical)
  - a. High school graduation date: \_\_\_\_\_ or number of years as college student: \_\_\_\_\_
  - b. Current School Name, city, & state: \_\_\_\_\_
  - c. High School GPA: \_\_\_\_\_
  - d. College GPA (if applicable): \_\_\_\_\_ Declared Major (if applicable): \_\_\_\_\_
  - c. Month/Year you expect to begin further study: \_\_\_\_\_
2. What is your intended career choice? \_\_\_\_\_
3. Other than the high school or secondary school named above, list all schools (name, city & state) you attended in the last three years and years of attendance.



# Utah Knights of Columbus Scholarship Application



4. List any advanced, honors or special academic courses you have taken (list most recent course or program first).

5. Enter your 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choice colleges (including city & state):

6. Do you plan to:      Live on campus/resident      Commuter

7. Check the highest level of education you expect to achieve:

A two-year specialized training program

Bachelor's degree

A two-year Associates degree

Master's degree

Medical or other professional degree

Other (specify) \_\_\_\_\_

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## Your Activities and Work Experience

1. List and describe activities in which you have participated at your school such as publications, debating, dramatics, music, art, student government, and clubs (please do not list an acronym – list full name). Include: (1) any awards or membership in honorary associations; (2) dates of participation; (3) offices held; and (4) approximate number of hours per week.



# Utah Knights of Columbus Scholarship Application



2. List sports you participated in, including: (1) the sport; (2) years of participation; (3) position; (4) special honors or awards; and (5) number of hours per week.

3. List any describe community volunteer activities in which you have participated, including: (1) type of work; (2) name of agency or organization; (3) dates of participation; (4) special awards; and (5) approximate number of hours per week. (Provide a brief description about the organization; no not list an acronym – list the full name).

4. List jobs, including summer employment, you have held in the past 2-3 years, including: (1) position; (2) approximate dates of employment; and (3) approximate number of hours per week.



# Utah Knights of Columbus Scholarship Application



**For current College applicants / post high-school applicants / technical school applicants**

5. Please share a little about your post high school experience at college / or at a technical school:

## **Your Experience**

**Tell of your** recent academic and personal experiences, describe one that gave you the feeling of greatest achievement or personal pride. [100-200 words]



# Utah Knights of Columbus Scholarship Application



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## You, Your Family, and Knights of Columbus Member Information

1. Applicants have represented diverse family backgrounds. Please describe any family characteristics or experiences you wish to share. [optional]

2. Enter information about your family below

Parent 1: Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Is Parent 1: ☐ Employed ☐ Unemployed ☐ Retired ☐ Deceased ☐ No Contact

Roman Catholic: ☐ Yes ☐ No Parish attending? \_\_\_\_\_

Knights of Columbus member: ☐ Yes ☐ No

Parent 2: Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Is Parent 2: ☐ Employed ☐ Unemployed ☐ Retired ☐ Deceased ☐ No Contact

Roman Catholic: ☐ Yes ☐ No Parish attending? \_\_\_\_\_

Knights of Columbus member: ☐ Yes ☐ No

3. Are you (the applicant) a member of the Knights of Columbus? ☐ Yes ☐ No / 4<sup>th</sup> Degree Member ☐ Yes ☐ No

4. Eligibility for the scholarships requires that the applicant is one of the following: a Member, Spouse of Member, Child of a Member, or child or Grandchild of a Member with legal guardianship. Please enter the Members information below:

Member full name: \_\_\_\_\_ Membership Number: \_\_\_\_\_

Member is living? ☐ Yes ☐ No K of C Council Number: \_\_\_\_\_ K of C Assembly Number: \_\_\_\_\_

Member address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Cell Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Name: \_\_\_\_\_



# Utah Knights of Columbus Scholarship Application





# Utah Knights of Columbus Scholarship Application



**Council/Assembly Endorsement is no longer needed. The K of C member must be in a Utah Council and/or Assembly. All information for the member will be verified against current membership records provided by the Membership Department of the K of C Supreme Council. This will determine the applicant's eligibility.**

The State Secretary will certify that the application from \_\_\_\_\_ (name) has met the requirements of eligibility and the application is to be considered under the following criteria.

Check one:

\_\_\_\_\_ The applicant is a member in good standing.

\_\_\_\_\_ The applicant is the spouse of a member in good standing.

\_\_\_\_\_ The applicant is the child or is under the legal guardianship of a member in good standing.

\_\_\_\_\_ The applicant is the child or under guardianship of a deceased member who was in good standing at the time of his death.

Member's Full Name: \_\_\_\_\_ Membership Number: \_\_\_\_\_

Council Number \_\_\_\_\_ and Assembly Number \_\_\_\_\_ (for consideration for the Patriotic Scholarship).

Date of death if member is deceased \_\_\_\_\_

***(All information for the member is required. Write N/A if not applicable))***