



Knights of Columbus Council 12555  
St. Mary Queen of Apostles  
Fresno, California

## SCHOLARSHIP APPLICATION

### Applicated Qualifications:

- \* Complete and submit application
- \* Be part of the current graduating class of any high school within Fresno and Madera County.
- \* Be accepted to a University, Community College or Vocational school for the fall term.
- \* Submit two Personal Reference Forms: One must be completed by a Teacher or Counselor AND a second by another adult (Teacher, Counselor or member of the community) who is not a relative.
- \* High School Transcript (unofficial acceptable with signature)
- \* Resume (School/Employment/Personal)

### Evaluation:

The Scholarship Committee from the Knights of Columbus Council 12555 will evaluate this and all applications based on the following criteria:

- \* Completed Application
- \* Both Personal Reference Forms
- \* Grade Point Average
- \* Financial Need
- \* Model Citizen within Community/Church Involvement
- \* School Leadership and Involvement (for example, clubs and sports)
- \* University, Community College or Vocational School acceptance

### Scholarships (\$4,000 available):

Deacon Montejano Memorial Scholarship - \$1,000

Other Scholarships varying amounts.

## Student Check List Requirements

Completed Scholarship Application

High School transcript

Resume (School/Employment/Personal)

2 Personal Reference Forms

Submit Application by due date: **April 28<sup>th</sup>, 2025 @ 4:00 PM**

\*Late submissions will not be evaluated.

Submit completed application and reference letters by: **April 28<sup>th</sup>, 2025 by 4:00 PM**

Drop it off at the Church Office: 4636 W. Dakota Ave, Fresno CA 93722

Or email: [KnightsOfColumbus12555@outlook.com](mailto:KnightsOfColumbus12555@outlook.com)



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(If necessary, please continue your responses on the reverse or on an attached sheet.)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Student Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Name(s) of Parent(s)/Guardian: \_\_\_\_\_

Is any member of your family a Knights of Columbus? Yes  No

If yes, please provide name of the Knight? \_\_\_\_\_

High School attending: \_\_\_\_\_

What University, Community College or Vocational school are you planning to attend:

\_\_\_\_\_

In 100 words or less, state your reason for applying for this scholarship:

Describe your involvement in school, church and community activities:

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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**PERSONAL REFERENCE FORM**

2 Personal Reference Forms: 1 by teacher or counselor AND 2nd by non-relative adult.

(If necessary, please continue your responses on the reverse or on an attached sheet.)

**This section is to be completed by the Applicant.**

Student Name: \_\_\_\_\_

College you plan to attend: \_\_\_\_\_

**This section to be completed by Personal Reference**

Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

How long have you known this applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_

Do you know of significant achievements by the applicant in school or personal life? Please elaborate.

Briefly tell us why would you recommend this student for this scholarship?

Please rate the applicant on the factors in the box below, marking the appropriate spaces:

	Very low	Low average	Average	High average	Very high	Not known
Ability (aptitude and intelligence)						
Overall educational achievement						
Motivation						
Character						
Leadership						
Model Citizen within Community						

REMARKS: Please make a frank evaluation of the applicant's character, sincerity of purpose, need for scholarship aid, and your estimate of his/her probable success in college.

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

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