THE KNIGHTS TEMPLAR EDUCATIONAL FOUNDATION

Michigan Division
Scholastic Achievement Award Application

Applications	must be postmarked	<u>no later than</u>
February 15,	for receipt of applicat	tions.
******	********	*******
	MISSION STATEME	ENT
******	**********	********
As this is a highly	y competitive award, all appl	ications will be considered
The Knights Tem	nplar Educational Foundatio	n, Michigan Division, shall
	licants for scholarships wit	
•	al origin, gender or Ma	
_	NOT "grants in aid" but	are open to all students
regardless of the	ii iiialiciai ciiculiistalices.	
******	*********	********
	ELIGIBILITY	
******		*******
•	receive an award from the K	•
•	igan Division, applicant mus	•
	uing a two (2) or four (4) yea	ar college degree, graduate
or trade school ed	aucation.	
*****	********	*******
	APPLICANT IDENTIFIC	ATION
******	******	_
Please print or	type application. DO NO	T use nencil Incomplete
-	not be considered.	i use pench. incomplete
Last Name	First	
	Age Telephone (
Address	Ci	ty
State	ZIP	
Fmail		

******	******	*********
	H SCHOOL APPLIC	
******	******	********
High School Name		
Address	City	StateZIP
NOTE; OFFICIAL TRA	NSCRIPT MUST ACC	OMPANY THIS APPLICATION
	-	your cumulative G.P.A. for your UST be evidenced by attached
transcript. PLEASE C	_	_
G-P-A	On a scale of	_
S.A.T. SCORES: Math	Verbal	A.C.T. Score
If neither is available	, please explain:	
PRINCIPAL or GUIDA	NCE COUNSELOR FU	IRNISHING A REFERENCE:
Name	Addre	SS
City	State	ZIP
Telephone Number ()	
COLLEGE YOU ARE P	LANNING TO ATTEN	D
Name of School		
Address	City	StateZIP
Expected Student Sta	atus: (Circle one) Full	I time / Part Time
Enrolled for next year	r? (Circle one) Yes / N	No
Major Course of Stud	y	
Minor Course(s) of St	udy	
Expected graduation	date	
Did you anticipate tra	ansferring or attendi	ng a different secondary schoo
than the one listed al	oove? (Circle One) Ye	es / No
If yes, list name of se	condary school	

SECONDARY SCHOOL APPLICANTS ONLY

(Applicable to students in College, University, Business or Tra Schools)
NOTE: OFFICIAL TRANSCRIPT MUST ACCOMPANY THIS APPLICATION
School Name
Address
City State ZIP
GRADE POINT AVERAGE: Please provide your cumulative G.P.A. for your COMPLETED academic period. This must be evidenced by attached transcript.
G.P.A On a scale of
S.A.T. SCORES: Math Verbal A.C.T. Score
If neither is available, please explain
Major Course of Study
Minor Course(s) of Study
Expected graduation date
Do you plan to attend graduate school? (Circle One) Yes/No
If yes, when?
Planned Graduate School Name
Course of Study
Estimated Graduation Date from Graduate School

PERSONAL DATA - ALL APPLICANTS

Please list all academic honors and/or awards you have received. (Use
separate sheet of paper if necessary)
separate sheet or paper if necessary)
Please state your primary educational goal.
riodoo stato your primary oduoditorial godii
Should you receive a scholarship, how would you use the money t
further your education?
iditilei your education:

FINANCIAL NEED	S - ALL APPLICANTS	
***********	**********	
NOTE: DO NOT leave any question	n blank. Provide a reasonable estimate	
if actual figures are not available.		
Annual Educational Expenses:		
Tuition and Fees \$	Transportation \$	
Room and Board \$	Books/Supplies \$	
Other Expenses (Explain)		
	Total Expenses \$	
-	have been approved and will receive	
this academic year (Scholarships a	\$ \$	
	\$ \$ \$	
	\$ \$ \$	
List money you will personally con	\$\$ \$s atribute toward your total expenses:	
List money you will personally con From savings and investments	\$sstribute toward your total expenses: \$ssssss	
List money you will personally con From savings and investments From summer employment Part time work during school year Parents/Guardian contributions	\$sstribute toward your total expenses: \$ssssssss_	
List money you will personally con From savings and investments From summer employment Part time work during school year	\$sstribute toward your total expenses: \$ssssssss_	
List money you will personally con From savings and investments From summer employment Part time work during school year Parents/Guardian contributions	\$ssssssssssss	

NON-ACADEMIC ACTIVITIES - ALL APPLICANTS
<u>List your memberships</u> in non-academic clubs, civic activities, community, religious or political organizations. <u>List</u> on a separate
sheet(s) of paper, with applicable dates, the organization and office held or rank attained and any non-academic awards and/or honors received.

CERTIFICATION - ALL APPLICANTS
I certify that all information contained herein or attached is correct to the best of my knowledge.
APPLICANTS SIGNATUREDATE

Applications will not be considered unless the following is complied with:
Pages 1 thru 6 of this application must be completed, as applicable, with all required information and necessary attachments.
Name of nearest Commandery to where you live
A list of Commandery Locations can be found at
www. knightstemplar.org/gckt/mi/
Official school transcript of your most recently completed academic term enclosed.

Applications must be postmarked no later than

Mail completed application and all related paperwork to:

S. K. Loren A. Winn, PGC Secretary/Treasurer P.O. Box 822 Pinckney, MI 48169-0822

February 15, for receipt of applications.