KNIGHTS OF PYTHIAS - GRAND DOMAIN OF INDIANA EDUCATIONAL ASSISTANCE PROGRAM APPLICATION

Name		
Address(P. O. Box or Street)	(City)	(Zip Code)
Name of Parents/Guardian		
Your Phone Number ()	E-mail	
Residing With: Mother Father B	oth ParentsOther	(be specific)
Annual Family Income: \$	NetGros	s ("X" one)
Father's Occupation: (be specific)		
Place of Employment		
Mother's Occupation: (be specific)		
Place of Employment		
List any of YOUR employers during your	last two years of high scho	ool:
List number of Brothers and Sisters and th	eir ages:	
How many of your family members are also	so enrolled in college?	
What colleges do other family members at	ttend?	
Explain any unusual family situations of w	which the committee should	l know
Applicant's Full Name		

Name and Address of High School now attending		
High School Phone Number	Counselor's Name	
Name and COMPLETE address of Col	llege(s) that you have applied to and/or been	
List any awards or honors achieved by	you (be specific)	
List school activities you participate in	:	
List community activities you participa	ate in:	

Please postmark your application and other requirements by JANUARY 25, 2021 to:

Dennis O. Adams, PGC, Chairman

P. O. Box 365

New Castle, IN 47362-0365 Phone: 765-529-7712

E-Mail-indianaglkop@att.net

Put Re: KP Scholarship Question in Subject Line

(For questions ONLY - NOT for sending entry!!!) None accepted online!

Application blanks also available @ www.knightsofpythiasofnewcastle.com

Click on "forms" on the top button listing...then on PUBLIC Academic Assistance Forms AND

Rules. Re-create this form in a word document, mail it, along with your two essays &

Transcript with a POSTMARK no later than January 25, 2021. Good Luck!