APPLICATION FOR SCHOLARSHIP

Knights of St. John, International
Commandery #313
Maria Stein, Ohio 45860

Must be completed and returned by Feb. 1 2023

Father must be in good standing with the Knights as a Lifetime member or at least 5 years membership

Must be a Son, Step- Son, Daughter or Step- Daughter

Scholarship will be awarded at the Knights breakfast in March

You must complete 1 semester with a B average from a accredited school.

Have member bring in to a regular Knights meeting and it will be paid out at next meeting.

All paperwork must be in to be considered. (Have recommentions put in a sealed envelope).
Please check that your recomedtion has been sent

Thank you

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APPLICANT _____
Last Name First Name Middle Name

ADDRESS _____

Father's Name (Guardian) _____ Years of Membership _____ to _____

Name of High School Attending _____

Address of High School _____

Name of Counselor _____

Graduation Date _____

Please attach a short essay on why the Knights are important to our community.
Plus how we get more people involved.

		Check	Dates Taken or Dates to be Taken
I Have Taken	1. PSAT	_____	_____
	2. ACT	_____	_____
	3. SAT	_____	_____

Though I may change my mind, the school or college I plan to attend is

_____

Though I may change my mind, I plan to major in

_____

I HEREBY APPLY FOR THE SCHOLARSHIP AND AGREE TO ABIDE BY THE RULES AS PUBLISHED WITH THIS ANNOUNCEMENT

_____
Signature of Applicant

_____
Signature of Parent or Guardian

Return this application along with 1) a transcript of your academic record and 2) a list of your extracurricular activities by no later than Feb. 1

Return to: Knights Scholastic Assistance Committee, % Maria Stein Branch, The St. Henry Bank, Maria Stein, Ohio 45860

Each applicant is to include at least three (3) "PERSONAL RECOMMENDATION" forms along with this application. It is your responibilty to make sure it is received in time.
Name of people you gave recommendation letters to

_____
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PERSONAL RECOMMENDATIONS

Student's Name _____

INSTRUCTIONS TO APPLICANT: Type or print your name at the top of this form. Give a separate form to three different teachers or administrators at your school and ask them to complete it and mail it to: Knights Scholarship Assistance Committee, % Maria Stein Branch, The St. Henry Bank, Maria Stein, Ohio 45860 or Email To kkshaner@outlook.com

INSTRUCTIONS TO TEACHER OR ADMINISTRATOR: Please make appropriate comments after each category listed below; mail to the above mentioned address

Accepts Responsibility _____

Attitude in Class _____

Completes Assigned Work _____

Courtesy _____

Respects Rights of Others _____

Work and Study Habits _____

Other _____

_____
Signature of Teacher

_____
Name of High School

Please mail no later than Feb. 1, 2023 To St Henry Maria Stein Branch Bank
Or Email to kkshaner@outlook.com kshaner@shinnbros.com