



Isabella Council #15



Isabella Assembly #122

Scholarship Application - 2026

Eligibility: Applicant and/or Parent(s) or Legal Guardian(s) of Applicant must be registered member of a St. Luke Parish in Southington. Applicant must be a High School Senior (or a High School Graduate) seeking to further his/her education in a recognized institute of higher learning during the upcoming academic year as a Freshman (or a 1st Year student).

Applicant _____

Church _____

Address _____

Email _____

Phone _____

Currently attending High School: (Yes /No)

Name of School _____

(Expected) Date of Graduation _____

Name and Address of Parent(s) or Legal Guardian(s)

Phone

Size of Household (#) _____

Parent(s)/Legal Guardian(s) Signature for Release of Academic Information _____

Applicant's Grade Point Average as attested by School Guidance Counselor/Registrar/Records Office: _____

Name of Guidance Counselor/Registrar/Records Officer: _____

Signature of Guidance Counselor/Registrar/Records Officer: _____

Name, Title, and Signature of Parish Official: _____

Signature of Parent(s) or Legal Guardian(s): _____

Signature of Applicant attesting the accuracy of the information here within: _____

K of C - Scholarship Application - 2026

Name of First Choice of Higher Learning Institute: _____

Second Choice, if applicable: _____

Third Choice, if applicable: _____

To which school(s) has the applicant been accepted: _____

Number of Children in household: _____

Number of Siblings that will be attending College, Private School, or Tuition Based Technical School in the upcoming Academic School Year: _____

Name of Sibling 1: _____

Name of School: _____

Sibling 2: _____

School: _____

Sibling 3 (+): _____

School(s): _____

Affiliation to Knights of Columbus (i.e. K of C Member Name & Relationship, Activities, Donations, etc.)

Please attach information on each of the following:

Involvement in your Parish: _____

Involvement in your Community: _____

Involvement in your School: _____

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How have the above activities shaped your ideas or career goals for the future? _____

Please feel free to use the balance of this sheet (front/back) to provide any additional pertinent information about yourself for this application, or if more space is necessary, attached to application.

Thank you for telling us about yourself. We wish you success in all your Godly endeavors.

Please mail your completed application and any accompanying material by **March 31, 2026**

Knights of Columbus
Isabella Council #15 / Isabella Assembly #122
Attn: Scholarship Committee
PO Box 644
Southington CT 06489-0644

“An intelligent heart acquires knowledge, and the ear of the wise seeks knowledge.” Proverbs 18:15

Church Service

Organization	Date	Activity	Hours

Please fill out the attached form for community service hours. You can go back as many years as you want. If there are any questions about the population of the form please reach out to John Griglun at jgriglun@gmail.com