

KNIGHTS OF PYTHAGORAS

Scholarship Application

Name:			
(last)	(first)	(m.i.)	
Current Address:			
	(street)		
(city)	(state) (zip)	_	
Parent's Address: (if different)			
Council Name:	Council	Council No.:	
Social Security Number:	Date of Birth:	//	
Telephone No.: ()	Selective Service Registrat	ion:	
Your expected date of graduation fr	om high school:	{yes} {no}	
GPA: (include a copy	of your high school transcript)		
How many years have you been a m	nember of The Order of Knights of Py	/thagoras:	
Enclose two confidential references	to attest to your moral and academic	achievements:	
In your own hand writing tell why y (<u>Use separat</u>	1		
Signature of State Director:			
Jurisdiction of:			
Signature of Most Worshipful Gran	d Master		
Jurisdiction of:			

"NO MAN STANDS SO STRAIGHT AS WHEN HE STOOPS TO HELP A BOY..."