

**KNIGHTS OF COLUMBUS**  
**COUNCIL 8450**  
**MONSIGNOR RAYMOND MULLINS SCHOLARSHIP APPLICATION**

(Please type or print)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Parent(s) Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Applicant's phone:** (\_\_\_\_) \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**College / University** \_\_\_\_\_

**Date accepted / entered:** \_\_\_\_\_ **Current G.P.A.** \_\_\_\_\_

**Estimated Date of Graduation:** \_\_\_\_\_

**Major Course of Study:** \_\_\_\_\_

**Academic Awards / Recognitions Received:**

**Describe your participation in campus activities and/or athletics:**

**Describe any involvement you have in community or charitable service:**

**List the activities you have participated in with Nativity of Our Lord Youth Group or a Catholic Campus Ministry Organization:**

**Describe how your involvement in Catholic ministries has benefited your spiritual and personal growth:**

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**Applicants Signature**

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**Date**

**MAIL COMPLETED APPLICATIONS, BY AUGUST 1<sup>st</sup>, TO:**

**E. JOHNSON  
ATTN: SCHOLARSHIP COMMITTEE  
3417 ARGYLE DRIVE  
PACE FL 32571**