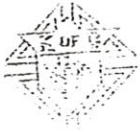


# Knights of Columbus

## Bishop Colin Campbell Bursary - Qualifications & Regulations

1. This program will be officially designated the Bishop Colin Campbell Bursary in recognition of his service as Chaplain to Cobequid Council No. 6633 Knights of Columbus.
2. One Bursary in the amount of One Thousand Dollars (\$1,000.00) may be awarded annually.
3. This Bursary will be sponsored by Cobequid Council No 6633 Knights of Columbus, Truro, Nova Scotia.
4. (i)The Bursary is open to practicing Catholics of good moral character who are residents of parishes in Colchester County and Sheet Harbour.  
(ii)Other things being equal, preference will be given to members of the Knights of Columbus in good standing, their sons, daughters, brothers, sisters, wives and grandchildren. Also includes similar relatives of deceased members.
5. The Bursary recipient will be determined by the Chairman of the Bursary Committee and such members as may be appointed to the Committee.
6. The scholastic records of the final two years of senior high school or equivalent will be considered in determining the successful applicant. An official transcript of final marks of the immediately previous year and those marks of the current year to date must accompany the application.
7. A minimum average of 70 is required for consideration.
8. Applicants must be entering the first year of a secondary education.
9. The applicant may be expected to have an interview with the Bursary Committee Chairman and/or members of the Committee.
10. Need will be considered.
11. Applications must be submitted to the Chairman of the Bursary Committee and include a letter outlining any church, school or community activities.
12. The Bursary will be payable to the recipient upon receipt of proof of enrolment in the proposed course of study. It is the responsibility of the recipient to supply such proof to the Chairman of the Bursary Committee.

Chairman of the Bursary Committee:



# Knights of Columbus

## Bishop Colin Campbell Bursary

Full Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_

Parents/Guardians \_\_\_\_\_

Parish & Church attending

Name \_\_\_\_\_

Address \_\_\_\_\_

Pastor \_\_\_\_\_

Name of institution last attended \_\_\_\_\_

Year of most recent attendance \_\_\_\_\_

Address of institution \_\_\_\_\_

Number of students in class \_\_\_\_\_ Applicants standing/rank in class. \_\_\_\_\_

### Education plans

Institution you plan to attend, \_\_\_\_\_

Address \_\_\_\_\_

Proposed course of study \_\_\_\_\_

Duration \_\_\_\_\_

Having read carefully and completely, the "Qualifications and Regulations" set out by the State Council of the Knights of Columbus, I agree to abide by the letter and the spirit of such regulations. To the best of my knowledge, the information given in this application is accurate and correct.

Date: \_\_\_\_\_, 20\_\_\_\_ Signature of Applicant \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_

Completed application forms and the required documents must be returned to the address below no later than April 15

Council Scholarship Representative RON VAUGHAN - 897-0785

Knights of Columbus Council # 6633 Address 12 WHITMAN CT, TRURO, B2N 3G3