

KNIGHTS OF PYTHIAS - GRAND DOMAIN OF INDIANA  
EDUCATIONAL ASSISTANCE APPLICATION

Name\_\_\_\_\_

Address\_\_\_\_\_

(P. O. Box or Street)

(City)

(Zip Code)

Name of Parent/Guardian\_\_\_\_\_

Your Phone Number ( )\_\_\_\_\_

Residing With: Mother Father Both Parents or Other (be specific)\_\_\_\_\_(circle)

Annual Family Income: \$\_\_\_\_\_ Net \_\_\_\_\_Gross (check one)

Father's Occupation: (be specific)\_\_\_\_\_

Place of Employment\_\_\_\_\_

Mother's Occupation: (be specific)\_\_\_\_\_

Place of Employment\_\_\_\_\_

List any of YOUR employers during your last two years of high school:

\_\_\_\_\_  
\_\_\_\_\_

List number of Brothers and Sisters and their ages:\_\_\_\_\_

How many of your family members are also enrolled in college?\_\_\_\_\_

What colleges do other family members attend?\_\_\_\_\_

\_\_\_\_\_

Explain any unusual family situations of which the committee should know\_\_\_\_\_

\_\_\_\_\_

Applicant's Full Name \_\_\_\_\_

Name and Address of High School now attending (if any) \_\_\_\_\_

High School Phone Number \_\_\_\_\_ Counselor's Name \_\_\_\_\_

Name and COMPLETE address of College you plan to attend next year \_\_\_\_\_

College Phone Number (if available) \_\_\_\_\_

Name of College you currently attend \_\_\_\_\_

List any awards or honors achieved by you (be specific) \_\_\_\_\_

List school activities you participate in: \_\_\_\_\_

List community activities you participate in: \_\_\_\_\_

Please submit your application and other requirements by JANUARY 25, 2016 to:

Dennis Adams, Chairman  
P. O. Box 365  
New Castle, IN 47362-0365  
E-Mail: dennyvoiceofandersonspeedway@msn.com (QUESTIONS ONLY)  
Phone: 765-529-7712

Applications available at: [www.knightsofpythiasofnewcastle.com](http://www.knightsofpythiasofnewcastle.com)