

KNIGHTS OF PYTHIAS - GRAND DOMAIN OF INDIANA  
EDUCATIONAL ASSISTANCE PROGRAM APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_  
(P. O. Box or Street) (City) (Zip Code)

Name of Parents/Guardian \_\_\_\_\_

Your Phone Number ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

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 \_\_\_\_\_

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

Name and COMPLETE address of College(s) that you have applied to and/or been  
accepted \_\_\_\_\_

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

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

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

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

**Please postmark your application and other requirements by JANUARY 25, 2019  
to:**

**Dennis O. Adams, PGC, Chairman**

**P. O. Box 365**

**New Castle, IN 47362-0365**

Phone: 765-529-7712

E-Mail – indianaglkop@att.net

(For questions ONLY - NOT for sending entry!!!) None accepted on line!

Application blanks also available @ [www.knightsofpythiasofnewcastle.com](http://www.knightsofpythiasofnewcastle.com)

Click on "event forms" ...then on Academic Assistance PUBLIC/form/rules

**THIS IS NOT A PDF FILE AND CAN NOT BE FILLED OUT ON LINE!!**