

St. Matthias Knights of Columbus Council 16945 Scholarship Application Form

Scholarship Amount: \$1,000

Eligibility Requirements:

- **Legacy Applicant** must be the dependent or grandchild of a registered member of St. Matthias Knights of Columbus Council 16945 living or deceased who was in good standing. **Ken Sadowski Applicant** must be the dependent of a registered member of **St. Matthias Parish** in Crown Point, Indiana.
- Applicant must be a high school senior graduating in 2026.
- Applicant must be planning to attend a 2 to 4 year accredited college or university or an accredited trade school for the **2026-2027** academic year.
- Applicant must demonstrate good citizenship.
- Applicant must have acceptable scholastic records.
- Applicant must show an active interest in school, community, and church activities.
- Applicant must be a practicing Catholic.

Application Deadline: All applications must be submitted between **January 1, 2026 and April 20, 2026.**

Application Checklist:

Please ensure that you have completed all the following steps:

- Fill out this scholarship application form completely and legibly.
- Provide a copy of your most recent high school transcript.

- Write an essay of **up to 500 words** explaining your involvement in school, community, and church activities, and how you have demonstrated good citizenship.
- Include **two letters of recommendation**. One should be from a teacher or school administrator, and the other should be from a community leader or clergy member.
- Submit your application and all supporting documents by the application deadline.

Please check one

St. Matthias Knights of Columbus Council 16945 Legacy Scholarship

Application for dependent or grandchild of a registered member of St. Matthias Knights of Columbus Council 16945

Ken Sadowski Scholarship

Application for the dependent of a registered member of St. Matthias Parish in Crown Point, Indiana

Personal Information:

Full Name: _____

Date of Birth: _____ Phone Number: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Email Address: _____

Name of St. Matthias parish member: (*if applying for the Ken Sadowski scholarship*)

Name: _____

Name of Knights of Columbus member: (*if applying for the Legacy scholarship*)

Name: _____

Parent/Guardian Information:

Parent/Guardian Name: _____

Parent/Guardian Phone Number: _____

Email: _____

Education:

High School Name: _____

High School Address: _____

City: _____ State: _____ ZIP Code: _____

Graduation Date: _____

Intended College/University/Trade School:

Essay:Please write a 500-word essay addressing your involvement in school, community, and church activities, as well as how you have demonstrated good citizenship.

Letters of Recommendation:

Please provide the names and contact information for the individuals who will be submitting letters of recommendation on your behalf.

- Teacher/School Administrator: _____
- Community Leader/Clergy Member: _____

Signature:

I hereby confirm that all the information provided in this application is accurate and complete to the best of my knowledge. I understand that any false information may disqualify me from consideration for the St. Matthias Knights of Columbus Council 16945 Scholarship.

Applicant's Signature: _____

Date: _____

Please mail your completed application and all supporting documents by **April 20, 2026** to:

Jim Lambert
12586 Massachusetts St.
Crown Point, IN 46307

For any questions or additional information, please contact us at our website: <https://kofccp.org/contact.html>