



**Catholic Fraternal Life**  
**College Scholarship Application Form**  
(Please print or type all information)

Are you currently a CFL member? Yes \_\_\_\_\_ No \_\_\_\_\_  
Policy Number \_\_\_\_\_

**Personal Information**

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_  
Date of Birth (MM/DD/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Home Address \_\_\_\_\_ College Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**School Information**

Name of High School Attended \_\_\_\_\_  
High School Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Year Graduated \_\_\_\_\_ Cumulative GPA \_\_\_\_\_  
Are you currently enrolled in a College/University/Trade School? Yes \_\_\_\_\_ No \_\_\_\_\_  
Name of University/College/Trade School \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Enrollment Date \_\_\_\_\_ Major/Minor \_\_\_\_\_  
Credit Hours Completed: \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_  
Student ID Number \_\_\_\_\_



## Student Information

GPA for current year \_\_\_\_\_

Have you received other Grants/Scholarships Yes \_\_\_\_\_ No \_\_\_\_\_

What scholarships have you received:

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**Please include a one-page essay on why you are submitting this application. Be sure to include the following points:**

- \* Your personal need for this scholarship and how it will help you achieve your college goals.
- \* Your academic and career goals.
- \* Your role and any volunteer or service involvement in your community.
- \* Your current employment and how it relates to your future plans (if any).

I, \_\_\_\_\_, affirm that the above application has been completed by me and the information provided is accurate and true to the best of my knowledge. I agree to be contacted by CFL if any further information is needed for my application to verify my eligibility. I also authorize CFL permission to contact the institution to verify enrollment if I am selected to receive this scholarship.

I have read and agree with the above statement.

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*Signature required*

*Date*

Please return completed application by mail to:

CFL  
Attn: Scholarship  
P.O. Box 327  
Belleville, IL 62222-0327  
Or email: [mbkurtz@cflife.org](mailto:mbkurtz@cflife.org)



## **Catholic Fraternal Life Scholarship Information and Instructions**

### **Eligibility Requirements:**

Member in Good Standing at Catholic Fraternal Life  
Currently Enrolled in a College, University or Trade School  
A Citizen of the United States

### **Applications Must Include the Following:**

- Completed Application
- Current College Transcript or Final High School Transcript
- One Page Essay as Described in the Application
- One Page Resume including School, Honors, Awards, Offices Held, Extracurricular Activities, Community Service, Volunteer and Work Experiences
- A Signed Letter of Recommendation from a Faculty Member or Supervisor
- A Current Headshot to be put in our Society Newsletter if Selected (which can be emailed in a jpeg file to [mbkurtz@cflife.org](mailto:mbkurtz@cflife.org))
- Signed Photo Release



## Catholic Fraternal Life Photo Release

By sending the enclosed photograph, I therefore grant Catholic Fraternal Life the permission and authority to use my photo in the Society's publications, including print and the Society's social media. I agree that Catholic Fraternal Life may use such photos of me for any lawful purposes, including publicity, illustration, advertising and Web content.

**I have read and understand the above:**

**Signature:** \_\_\_\_\_

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

**Date:** \_\_\_\_\_

**Signature of Parent or Guardian (if under 18):** \_\_\_\_\_