



# Saint Andrew's Society Williamsburg Virginia

## KEN GRAHAM EDUCATIONAL SCHOLARSHIP APPLICATION

### 1. Personal Information

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employed: Yes or No Occupation: \_\_\_\_\_

If Employed, List Your Annual Income: \_\_\_\_\_

### 2. Family Information

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

### 3. Heritage

Do you have Scottish Ancestry? If so, describe. \_\_\_\_\_

\_\_\_\_\_

Is a relative a member of St. Andrews Society of Williamsburg? \_\_\_\_\_

Is a relative a member of other Scottish Organizations? List: \_\_\_\_\_

\_\_\_\_\_

If yes, please provide their name: \_\_\_\_\_

#### 4. Academic Information

List College/High School Attending/Last Attended: \_\_\_\_\_

Academic Average (all subjects): \_\_\_\_\_

List Academic Honors Received: \_\_\_\_\_

\_\_\_\_\_

List University/College/School in which you are or were enrolled:

Name: \_\_\_\_\_ Location: \_\_\_\_\_

Academic Average (All subjects): \_\_\_\_\_

List University/College/School in which you were accepted and date studies will begin: (Attach your acceptance letter)

Name: \_\_\_\_\_ Location: \_\_\_\_\_

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

Planned Major/Course of Study: \_\_\_\_\_

#### 5. Other Scholarships & Grants

List other grants/scholarships obtained: \_\_\_\_\_

\_\_\_\_\_

Amount: \_\_\_\_\_

Please attach a copy of your federal aid request (FAFSA), if applicable

## 6. Personal Details

Please attach additional pages of supporting information, as required

What has been your involvement with Scottish Culture?

How do you plan to utilize the knowledge gained? Describe your career goals?

## 7. Certification

I hereby certify that the information contained in this Application Form is complete and correct to the best of my knowledge. Further information will be provided upon request.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT YOUR NAME: \_\_\_\_\_

Mail to: Saint Andrews Society, PO Box 533, Williamsburg, VA 23187