Autonomous, Knightly, Noble and Religious Order of the Crown of Thorns

Scholarship Application

	First	Middle
	Telephone	_()
State	Zip Code	
?		
izations in which you l	nave been involved:	
	POSITION	YEAR
	State	Telephone

List school-related, scholastic or community honors or awards and dates received:
List community/organizational or church activities:
List any volunteer service you have performed in your school/community:
Certification Applicant:

I certify that all the statements made in this application form are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

Signature _____ Date _____

Grade Point Average _____

I have reviewed the applicant's responses and certify that they are correct, insofar as the school records indicate.

Counselor