



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