



Cumberland
UNIVERSITY

The Chuck Brockman Memorial Scholarship
Sponsored by The Knights of Columbus Council 9787

Scholarship Application Form

1. Full Name _____ Date _____

2. Social Security Number _____ - _____ - _____

3. Address _____

4. Phone Number _____ Email Address _____

5. Have you graduated or will you graduate prior to the Cumberland University Semester for which support is requested? ___ Yes ___ No

6. Have you been or will you be accepted by Cumberland University prior to Semester for which funding is requested? ___ Yes ___ No

7. Grade Point Average _____ ACT or SAT composite score _____

8. Please list all Honors, Dual Enrollment, and/or Advanced Placement Courses you have taken or are currently enrolled.

9. Have you requested financial support from other sources?
___ Yes ___ No

Please list (Use back of application if additional space is needed).

10. Please list Volunteer/Community Service/School Sponsored Activities
(Use back of application if additional space is needed)

11. Do you work outside the home? _____ Yes _____ No
Employer _____ Hours per week _____

12. Are you or your family a registered member of St. Frances Cabrini Church in
Lebanon, Tennessee?
_____ Yes _____ No
If no, what Parish and phone number? _____

13. If you are awarded the Scholarship, do you agree to come to a meeting to be
introduced to the Council members?
_____ Yes _____ No