

INSTRUCTIONS FOR COMPLETING APPLICATION
APPLICANT DOES NOT HAVE TO HAVE ANY MASONIC AFFILIATION

1. Applicant must be a high school senior or an undergraduate college student who plans to attend full-time at an accredited college, university, trade or vocational school, and must reside in Michigan and be a citizen of the United States of America.
2. Applicant must use the official Michigan Masonic Charitable Foundation form. This form must be signed and dated by the student, his or her parent or guardian, and the Lodge Secretary and Worshipful Master. The application must have the endorsement of a Masonic Lodge in Michigan.
3. Letter and statements must be originals on one side of a sheet of 8 1/2 x 11 paper, dated and signed by the author.
4. Applicant must include an official high school transcript, certified by the school that includes the student's academic record from the beginning of the 9th grade to the most recent marking period. College students must send a copy of their most recent grades along with their current GPA. These may be photocopied.
5. ACT or SAT test scores must be included, and these may be photocopies.
6. After completing the application, keep all records at your lodge, send just page 4 to Grand Lodge for approval.

IMPORTANT NOTE: The applications need to be in the office by May 1st..

APPLICATION FOR SCHOLARSHIP AWARD

Please Type or Print in Ink

Application for Scholarship Award for academic year 20____ thru 20____

Case No: _____
(Office Use Only)

(Mrs., Ms., Miss, Mr.) _____
-Circle One- Full Legal Name

Tele. Number: _____

Student Address: _____
Number Street
City Zip County

High School(s) Attended: _____

Name of School City Years Attended

Name of School City Years Attended

Date of Graduation: _____ Intended Major: _____

College Choice: _____

If enrolled, College student I.D. number: _____

Father: _____ Occupation: _____
Name

Mother: _____ Occupation: _____
Name

State any other Lodge where you have turned this application in this year: _____

Signature: _____
Student

Dated: _____

Signature: _____
Parent, Guardian, or Spouse

Dated: _____

Please note that should you be awarded a scholarship grant, you may be contacted by a Foundation representative for media purposes.

Student Name: _____

SCHOLASTIC (High School)

Academic Honors and Awards (State Year and Nature of): _____

Member of Academic Organization (State name of organization, year, & if position held): _____

Elective courses taken (State name of class & year, i.e.: Band 2, 3; Choir 2-4; Art 1): _____

Courses I like the most (give short explanation & any successes): _____

Courses I disliked the most (give short explanation & any successes): _____

Faculty Member who made the most impression on me and why: _____

EXTRA CURRICULAR (School Related)

Honors and Awards (State year and nature of): _____

Offices and positions of Leadership (State name of group, position, year): _____

Member of Organization where *no office* was held (State name of group, year, i.e.: Drama 2, 3. Please state only major activities): _____

EXTRA-CURRICULAR (Non-School Related)

Honors and Awards (State year and nature of): _____

Offices and positions of Leadership (State name of group/organization, position, year): _____

Member of Organization (State name of organization, year, such as: Scouts, DeMolay, Jobs, Rainbow, 4H, Junior Achievement, Etc. –state only major activities): _____

Employment: (State name of employer(s), positions held, periods of employment, average weekly hours, earnings, etc.):

Other

List all siblings and ages: _____

Have you been granted financial aid? _____ Details of the following:

| | | | |
|----------------|----------|--------------------------|----------|
| a) Scholarship | \$ _____ | b) Federal or State Loan | \$ _____ |
| c) Pell Grant | \$ _____ | d) Campus Job | \$ _____ |
| e) Other Grant | \$ _____ | f) Other | \$ _____ |

TOTAL FINANCIAL AID \$ _____

Have you reasons to expect financial aid from any other source? _____

If so, give details: _____

Any additional data to show financial need and general worthiness, be specific in this: _____

LODGE ENDORSEMENT

(To be completed by the Lodge)

RETURN THIS PAGE ONLY TO THE GRAND LODGE OFFICE

1 FROM PER SCHOLARSHIP RECIPIENT

Student Name: _____

Student Address: _____

Student Phone: _____

Attending School: _____

Lodge Name: _____

Lodge No. _____

The application was favorably voted on by the Lodge on: _____

The Lodge agreed to contribute from its own funds the amount of: \$ _____

I hereby endorse that I have reviewed this application, ensured its completion, and that the Lodge has voted and approved the applicant for receiving the Scholarship for which they are applying.

Signed: _____
Worshipful Master

Secretary

Dated: _____

CHECKLIST OF MATERIALS THAT MUST BE INCLUDED:

NOTE: DO NOT FORWARD ITEMS 1 THROUGH 5 TO THE OFFICE, THEY ARE FOR YOUR RECORDS ONLY

1. Two letters from school personnel
2. Two letters from non-school personnel
3. ACT/SAT test results
4. Official transcript from high school
5. Applicant's statement of vocational or professional goals
6. Signature of Worshipful Master
7. Signature of Secretary
8. Name, address, phone number of applicant
9. Amount of Lodge contribution
10. Lodge name & number

NOTE: DO NOT DELAY This application must be **filled out completely** and returned, by the Lodge, to the Grand Secretary's office, **ABSOLUTELY NO LATER** than **May 1st** for consideration for the following **full** school year.

This form for Lodge and Grand Lodge use only-To be returned to Grand Lodge