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## **Masonic Scholarship Application**

The Grand Lodge of Ancient Free and Accepted Masons of Idaho 2021 Scholarship is open to application by all students who will be attending a College, University, or Technical School in the 2021 school year. Masonic affiliation is not required. Please forward the following application, financial information, transcripts and required attachments/statements to the Grand Lodge Youth Committee.

## APPLICATIONS MUST BE POSTMARKED BY MAY 26, 2021

## **STUDENTINFOMRATION**

Name:			
Date of Birth:	State of Birth:	City of Birth:	
Address:	City:	State:	
School Address:	City:	State:	
Permanent Phone:	School or Cell Phone:	School or Cell Phone:	
Student email Address:			

# **FAMILY INFORMATION**

Parent 1 Name:	Relation:
Address:	City:
State:	Zip:
Permanent Phone:	Cell Phone:
Parent 2 Name:	Relation:
Address:	City:
State:	Zip:
Permanent Phone:	Cell Phone:



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# MASONIC AFFILATION (NOT required to be awarded)

Is or was at the time of his death one of t			
Accepted Masons or a Lodge of Free and	d Accepted Mason	s (need only to check	k one if applicable):
My Father		My Step Father	
My Grandfather		My Step Grandfatl	her
No. of Lodge:		Name of Lodge:	
MASONIC YOUTH GROUP MEMB	ERSHIP (NOT re	equired to be award	<u>ded)</u>
I am currently a member of Jobs Daughte International: Yes N/A	ers Bethel N	0.	City:
I am currently a member of the Internation Order of Rainbow for Girls: Yes	onal Assembl	ly No:	City:
I am currently a member of the Order of DeMolay: Yes N/A	Chapter:		City:
If you do not have Masonic Affiliation, please <b>ATTACH</b> a statement of how you learned of our scholarship and why it interested you.  SCHOOLINFORMATION			
List the name of the College, University	or Technical Scho	of you will Attend:	
Registrar's Address:	C4 - 4		7
	State: Registrar's email:		Zip:
registral strione.	registrar s'emain		
Major:	Minor:		
Program of Study:			
Length of Program: (e.g. weeks/months):			
Study leads to a Certificate or License: Yes No			
If Yes, list Certificate/License type:			



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# **SCHOOL INFORMATION CONTINUED:**

List the name of High School	ol Attended:			
Address:				
City:	State:	Zip:		
Final GPA:	State.	Zip.		
111141 0171.				
FINANCIAL INFORMAT	TON			
	- <del></del>			
<b>Applicant Student Depend</b>	ency Status			
As of today (the day you sig	ned this application), are you	married? Answer "Yes" if	Yes	No
you are separated but not div		married: Amswer 163 ii		
	n active duty in the United Stat	tes Armed Forces for	Yes	No
purposes other than training				
Are you a Veteran of the Un			Yes	No
Do you have children that re	ceive more than half of their s	upport from you?	Yes	No
Do you have dependents (of	her than your children or spou	se) living with you and	Yes	No
receive more than half of the	eir support from you?			
Applicant Student Financi	al Information			
	w the type of tax return you fi			
$\square$ 1040 $\square$ 1040A $\square$ 1040EZ				t, or if None
State			State None:	
Y	List both your adjusted gross income and your spouse's (if applicable) adjusted gross \$:			
List both your adjusted gross income and your spouse's (if applicable) adjusted gross				
income for the last year?	2		Φ.	
List the income you earned f	\$:			
List and income/aid you will	\$:			
	Φ.			
school year? (Include AmeriCorps benefits, awards, living allowances, interest accrual payments, fellowships and assistantships).				
List other compensated income on your behalf (e.g. bills) not reported elsewhere on \$:				
this application.				
If you are a Veteran's Dependent, will you receive any Veteran's Education Benefits? If so, select from				
the type(s) listed below of Veteran's Education Benefits you will receive?				
None	Montgomery GI Bill	Post 9/11 G Bill,	Montgom	ery GI Bill
	Active Duty, Chapter 30	Chapter 23	Selected reser	
	3,7 - 4	r	1606	, <b>r</b>
Reserve Educational	☐ Vocational	Dependents'	Any other	r type of
Assistance Program,	Rehabilitation and	Educational Assistance,	Veterans Edu	
Chapter 1607	Employment, Chapter 31	Chapter 35	Benefits	



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Applicant	Student	Education	Expenses
ADDIICAIII	MUUCIIL	Duucauon	LIADEHSES

degree or certificate.

Applicant Student Education Expenses			
College/Institution Tuition:	\$:		
Books:	\$:		
Housing and Food:	\$:		
Other Expenses:	\$:		
Total:	\$:		
Expenses are per:  Quarter Trimester Year	Other:		
Applicant Student Other Income (anticipated sources)			
Student Loans:	\$:		
Grants:	\$:		
Scholarships:	\$:		
Aid:	\$:		
Applicant any other anticipated income and sources the  Source: Source:	\$:   \$:		
Source:	\$:		
Parental information  Select from below your parents' marital status as of the date you signed this application.			
Married Divorced or separated	Single	Widowed	
List Parent 1- State of legal residence?		State:	
List Parent 2 - State of legal residence?	State:		
List Parent 1 - number of dependents for last year.	Number:		
List Parent 2 - number of dependents for last year.	Number:		
List the number of dependents in your parent(s) household(s) that will be attending a college this coming year? Include yourself in this number. Don't include your parents in this number. Include additional dependent students only if they will be attending at			
least half-time during the coming school year at an institution that leads to a college			



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#### STUDENT'S STATEMENT (ATTACH):

Please <u>ATTACH</u> a statement of at least 250 words describing why you have chosen the particular field or program of study listed in this application. Describe why it interests you and what career you hope to purse with the education you are seeking? If you have not decided on a major or program of study, describe a field that currently interests you as a potential major.

## SCHOOL ACTIVITIES AND HONORS (ATTACH):

Please **ATTACH** a list of High School activities that you have participated in during you attendance. After each activity, identify the grade(s)/year(s) you participated in that activity using the symbols 9, 10, 11, and 12. Additionally, list any leadership position you may have held in these activities and include the grade (9, 10, 11, 12) when you held that position. Please describe any special circumstance which may have limited your participation in school activities. **Additional**, describe any honors or distinctions received.

## **COMMUNITY INVOLVEMENT AND HONORS (ATTACH):**

Please <u>ATTACH</u> a statement of activities in which you, as a volunteer, have been of service to your community in general and/or to specific community members in particular. This volunteer service may have been performed as a member of an organization or on your own as an individual. Indicate any leadership roles you have held in these areas. Describe any community honors or distinctions received.

#### **OFFICIAL TRANSCRIPT:**

Please **ATTACH** a copy of your Official Transcript.

#### **PHOTO**

Please **ATTACH** a photo that can be used to advertise the winners of the scholarships.

X		
Applicant Signature		

No scholarship will be awarded without a completed application accompanied by a copy of your Official Transcript. The deadline for the scholarship application is May 26, 2021.

Ensure your application includes the		Mail Completed Application packets		
f	ollowing:	to:		
	1. Completed Application Form – with	Grand Lodge Youth Committee		
signature		Grand Lodge A.F. & A.M. of Idaho		
'	2. Copy of official Transcripts	219 N. 17 <sup>th</sup> St.		
'	3. Required Statements/Attachments	Boise, Idaho, 83702		
4	4. Financial information	Email: gs@idahomasons.org		