



### 32° SCOTTISH RITE MASONS SCHOLARSHIP APPLICATION

Application to be personally completed by applicant, submitted in duplicate and received by February 23, 2015 in Valley Secretary's Office. Any application received after that date cannot be considered for the ensuing academic year.

Return to Valley Secretary:  
Frank T. Droria

**Valley of Grand Rapids (800) 340-4060  
233 East Fulton  
Grand Rapids, MI. 49503-3270**

*(please type or*

*Additional pages may be attached for questions 4b, 4c, 14 and your Personal Statement.*

Last Name: \_\_\_\_\_ First \_\_\_\_\_ MI: \_\_\_\_\_ Date of \_\_\_\_\_

Home Street \_\_\_\_\_ Telephone: \_\_\_\_\_

Home City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

1. Father's \_\_\_\_\_ Occupation \_\_\_\_\_

2a. Mother's \_\_\_\_\_ Occupation \_\_\_\_\_

2b. Mother's or Father's address (if different than \_\_\_\_\_)

3. Do your parents or grandparents hold a Masonic Organization Membership? Yes \_\_\_\_\_ No \_\_\_\_\_

3a. Parents - Which Masonic Group? \_\_\_\_\_

3b. Grandparents - Which Masonic group? \_\_\_\_\_

3c. ANY relative belong to a Masonic Group/Which group? \_\_\_\_\_

4a. To what youth organization affiliated with Freemasonry do (have) you belong(ed)? (DeMolay, Rainbow/ Job's Daughters, other)?

\_\_\_\_\_

4b. To what other non-school related groups do you \_\_\_\_\_

4c. State briefly your extracurricular school-related interests and \_\_\_\_\_

\_\_\_\_\_

5a. Name of accredited school to be \_\_\_\_\_ Major: \_\_\_\_\_

5b. Address of \_\_\_\_\_

6. Current GPA: \_\_\_\_\_ 7. Which class will you be entering? (freshman, sophomore, Jr, Sr \_\_\_\_\_)

8. Adjusted Gross Family Income as reported to \_\_\_\_\_

9. Indicate amount of aid anticipated from sources other than family (grant, loan, job, other \_\_\_\_\_)

10. Provide an estimate of yearly financial

Tuition: \$ \_\_\_\_\_  
 Books/Supplies: \$ \_\_\_\_\_  
 Room/Board: \$ \_\_\_\_\_  
 Other: \$ \_\_\_\_\_  
 Total: \$ \_\_\_\_\_

11. Present Sources of Income for

Job (work/study): \$ \_\_\_\_\_  
 Loan(s): \$ \_\_\_\_\_  
 Scholarship(s): \$ \_\_\_\_\_  
 Grants: \$ \_\_\_\_\_  
 Other Revenues: \$ \_\_\_\_\_  
 Total: \$ \_\_\_\_\_

*Vocation:*

12a. For what career are you \_\_\_\_\_

12b. If Undecided, indicate possible \_\_\_\_\_

13a. How many children in your \_\_\_\_\_ Age \_\_\_\_\_

13b. How many children in your family are attending \_\_\_\_\_

14. Additional Information you wish to be considered \_\_\_\_\_

15. Previous Scottish Rite Scholarship recipient? \_\_\_\_\_ Or New Applicant: \_\_\_\_\_

The following items constitute the necessary information for scholarship consideration. Any application lacking any of these items will not be considered:

- a. A personal statement of your values, goals, and career plans. (limit response to 1-2 pages)
- b. Official Copies of your high school, including the FIRST SEMESTER OF THE SENIOR YEAR, or college transcripts and SAT, ACT or GRE results. Facsimile copies will not be accepted.
- c. Completed and signed Scottish Rite Scholarship Form.

I believe the foregoing statements to be accurate. I hereby pledge any Scholarship monies awarded to me will be used strictly for college expenses such as tuition, supplies and room and board. By accepting a scholarship, I allow the 32° Scottish Rite to use my name to publicize the Scottish Rite Scholarship.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

32° Scottish Rite Scholarship aid is a gift, not a loan, and can be based on academic achievement, participation in worthwhile activities, financial need, and self help. Checks will be issued by August 1<sup>st</sup> to successful applicants drawn payable to the school named in question 5a.

NOTE: If you are awarded a scholarship and decide to attend a school other than the one listed in 5a, it is your responsibility to notify the Scholarship Committee of any change in a timely manner. Otherwise the check will be

DEPUTY AND COMMITTEE USE ONLY			
Approved by the Valley Committee (name & date): _____			
Approved by the State Committee (name & date): _____			
Approved by the Deputy (name & date): _____			
Amount granted:		Payable to:	
Check to be sent (select):	Deputy: _____	State Selectman Committee: _____	Valley Secretary: _____ College: _____