THIS FORM MUST BE COMPLETED IN FULL AND POSTMARKED BY MARCH 31, 2018

Jacques DeMolay Lodge Scholarship Fund, Inc.

PO Box 541301

Houston, TX 77254

**Application for a $1,500.00 Scholarship**

## PLEASE BLOCK PRINT OR TYPE NEATLY

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| **STUDENT PROFILE:** |

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| Name |  |  |  |  | **Winners will be required to provide** |
|  | Last | First | Middle (full) |  | Social Security # |

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| Home Address |  |  |  |  |  |  |  |
|  | Street or P. O. Box |  | City |  | State |  | Zip Code |

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| ( ) - |  | ( ) - |  | / / |  |  |
| Home Phone |  | Work Phone |  | Date of Birth |  | Age |

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|  | Parents or Guardians Name |  | Relationship |  | Occupation |  | Annual Earnings |
| Mr./Mrs./Ms. |  |  |  |  |  |  |  |
| Mr./Mrs./Ms. |  |  |  |  |  |  |  |

Parents or Guardians Address and Phone # if Different from above

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| Street or P. O. Box | | |  |  | | City | |  | State |  | Zip Code |
| ( ) - |  | ( ) - | | |  | |  |  | | | | |
| Home Phone |  | Work Phone | | |  | |  | Email Address | | | | |

Are your parents: (Circle one please) Married Divorced Separated

Do your parents own their own home? **Y / N** Estimated current market value: $\_\_\_\_\_\_\_\_\_\_

How many people are in your immediate family? \_\_\_\_\_\_\_\_\_\_ How many people live in your home? \_\_\_\_\_\_\_\_\_\_

List here all the children in the family and indicate the percent of parental financial support they receive during the year.

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|  |  | **Name** |  | **Estimated Percent** |  | **Age** |  | **Income Tax Dependent?** |  | **Public or Private School?** |
| Applicant |  |  |  |  |  |  |  | Y / N |  |  |
| **Brothers:** |  |  |  |  |  |  |  | Y / N |  |  |
|  |  |  |  |  |  |  |  | Y / N |  |  |
| **Sisters:** |  |  |  |  |  |  |  | **Y / N** |  |  |
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Is there a medical or physical disabled or elderly person who depends upon your parents for support?  **Y / N**

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| State any instance of prolonged personal or immediate family illness: |
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| Briefly state your need for this scholarship: |
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| **ACADEMIC PROFILE:** |

Name of High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Graduation Date: \_\_\_\_\_\_\_\_\_

Class Rank \_\_\_\_\_\_\_\_\_\_ Class Size \_\_\_\_\_\_\_\_\_\_ GPA \_\_\_\_\_\_\_\_\_\_\_ on a \_\_\_\_\_\_\_ Point System

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| Test Scores *(Do not use percentile ranks)* | | | | | | | | | | |
|  |  | English |  | Math |  | Verbal |  | Composite |  | Last Test Date |
| PSAT |  |  |  |  |  |  |  |  |  |  |
| SAT |  |  |  |  |  |  |  |  |  |  |
| ACT |  |  |  |  |  |  |  |  |  |  |

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| **COLLEGE /UNIVERSITY INFORMATION:** |

Proposed Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_If undecided, check here 

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| College of choice  (List 1st, 2nd and 3rd Choices) |  | Applied for admission? |  | Have you been accepted? |
| 1. |  | Y / N |  | Y / N |
| 2. |  | **Y / N** |  | **Y / N** |
| 3. |  | **Y / N** |  | **Y / N** |

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| **FINANCIAL INFORMATION:** |

Have you been employed within the last 12 months? **Y / N**

How much did you save for college? $\_\_\_\_\_\_\_\_\_\_\_

Do you plan to work during college? **Y / N**

Please answer the following questions. Base your answers on a full year of attendance at your college or university.

Tuition: $\_\_\_\_\_\_\_\_

Room and Board: $\_\_\_\_\_\_\_\_

Books: $\_\_\_\_\_\_\_\_ Total $\_\_\_\_\_\_\_\_\_

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| **For each source listed below, indicate if you have applied for assistance. Also, indicate how much you have received or plan to receive from each source:** | | | | | | | | |
| Source |  | **Applied?** |  | **Awarded?** |  | **Still Pending?** |  | **Amount and Source**  **(Received, anticipated or requested)** |
| Veteran’s Benefits |  | Y / N |  | Y / N |  | Y / N |  |  |
| Social Security Benefits |  | **Y / N** |  | **Y / N** |  | **Y / N** |  |  |
| Pell Grant |  | **Y / N** |  | **Y / N** |  | **Y / N** |  |  |
| Work Study Program |  | Y / N |  | **Y / N** |  | **Y / N** |  |  |
| State of Texas Grant |  | **Y / N** |  | **Y / N** |  | **Y / N** |  |  |
| Financial Aid |  | **Y / N** |  | **Y / N** |  | **Y / N** |  |  |
| Student Loan |  | **Y / N** |  | **Y / N** |  | **Y / N** |  |  |
| Other Scholarships |  | **Y / N** |  | **Y / N** |  | **Y / N** |  |  |
| ***(If you need additional space, please attach a list outlining details including dollar amounts.)*** | | | | | | | | | |

Will your family help finance your education? Y / N If Yes, to what amount? $\_\_\_\_\_\_\_\_\_(annually)

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| **EXTRACURRICULAR RECORD:** |

1. List your major extracurricular activities (both in‑school and out‑of‑school) and the years of participation: For example; Band, 11-14: Basketball 13, 14: French Club 10-11; Junior Achievement, 14, B'nai B’rith 09-13; Future Farmers of America 11-14, etc.

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1. If your experience includes paid or volunteer work, list the job title, the average number of hours you worked each week and the dates of employment.

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1. List awards and honors you have received in both academic and extracurricular areas.

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1. List offices and positions of leadership you have held both in school and out of school.

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| **ESSAY SECTION:** **Must be handwritten** |
| Write a short essay about your talents, interests or activities and/or your plans for the future. Confine your essay to this space. |

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I, the undersigned, declare that I am applying for a scholarship from the Jacques DeMolay Lodge Scholarship Fund, Inc. to further my education at an institution of higher learning; that all the proceeds from any scholarship which may be awarded will be used exclusively to subsidize the costs of tuition, books and other expenses directly related to my education; and that I will proceed with deliberate care to graduate.

Further, I understand that this scholarship, if awarded, will be paid to my school; that the award is for one year only and if I desire additional support, if available in the future, I am required to apply again next year; and that I must remain a student in good standing and provide evidence of continued good standing in order to receive the scholarship or any part thereof.

I further acknowledge that I have read this entire application, have completed and provided all the appropriate information and that all information contained herein is accurate to the best of my knowledge and subject to verification by the scholarship committee. I understand that proof of grades may be required before receipt of scholarship funds. I understand that I must truthfully answer all the questions on this application. I also understand that if I do not, I may be refused a scholarship or continuance of a scholarship. If I receive a scholarship from this body, I understand that additional information may be required upon completion of the current academic year or at the completion of my degree plan.

**I understand that this application must be accompanied by the following for the application to be considered for acceptance ALL IN ONE envelope- DO NOT MAIL REGISTERED OR SIGNATURE REQUIRED! Delivery Confirmation is acceptable due to the volume of applications:**

1. Two (2) letters of recommendation.

A. One from a non‑school‑related adult who personally knows the applicant. (Minister, employer, scout leader, etc.)

B. One from a teacher of which the applicant was a student

2. A copy of my high school transcripts.

3. A copy of my SAT or ACT tests scores (Printed online score are acceptable if they include the students name and identification.)

4. (Optional) Copies of any other documentation, awards, achievements or distinctions that you feel may be pertinent to the selection committee.

I authorize all of the schools that I have attended to furnish this committee with any information that they may have regarding my academic career.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_