

APPLICATION FOR ORDER OF THE EASTERN STAR SCHOLARSHIP

PLEASE ATTACH CURRENT TRANSCRIPT OF GRADES FROM SCHOOL OR COLLEGE YOU ARE NOW ATTENDING.

PLEASE FEEL FREE TO ATTACH ANY INFORMATION THAT MIGHT HELP US IN DETERMINING YOUR FINANCIAL NEEDS.

Application must be completed and signed by applicant, reviewed and signed by adult leaders of the group in order to be considered. Applicants must be graduating high school seniors or college under-graduate students who have not attained the age of 21 years before the beginning of a fall-winter semester and are still active in their Orders. Students **MUST** maintain a minimum grade point average of 2.5 at all times to qualify.

Scholarship(s) are awarded on the basis of merit as demonstrated by grades, test scores, school, community service and need.

Entry must be postmarked by May 1, 2016

**Please send to: Ms. Mabel Allen, Chairman
Job's Daughters Scholarship Committee
3509 S 85 E Ave.
Tulsa, OK 74145
(918) 627-1583**

NAME (First) (Middle) (Last)

DATE OF BIRTH SOCIAL SECURITY NUMBER

ADDRESS (Street) (City) (Zip Code) (Phone)

BETHEL:

INITIATION DATE:

ARE YOU THE RECIPIENT OF ANOTHER SCHOLARSHIP?

IN WHAT AMOUNT? FROM WHOM?

If You Have More Than One Scholarship Please Attach A Separate Sheet Of Paper.

COLLEGE OR SCHOOL DATA:

1. Are you currently enrolled?

2. Name of college or school now attending:

3. Present grade level:

COLLEGE OR SCHOOL YOU PLAN TO ATTEND:

NAME OF COLLEGE OR SCHOOL: _____

NAME AND ADDRESS OF REGISTRAR: _____

FIELD OF STUDY: _____

PREPARATION:

WHAT HAVE YOU DONE TO PREPARE FOR COLLEGE OR SPECIALIZED TRAINING?

BE SPECIFIC: _____

OCCUPATION OF FATHER OR GUARDIAN: _____

PLACE OF EMPLOYMENT AND YEARLY SALARY: _____

OCCUPATION OF MOTHER: _____

PLACE OF EMPLOYMENT AND YEARLY SALARY: _____

NUMBER AND AGES OF OTHER DEPENDENTS LIVING AT HOME: _____

DO YOU EXPECT TO WORK WHILE GOING TO SCHOOL? _____

IF YES, FULL OR PART TIME? _____ EXPECTED MONTHLY INCOME: _____

YOUTH GROUP ACTIVITIES (PARTICIPATION DURING THE PAST TWO YEARS:

CHURCH ACTIVITIES: _____

SCHOOL ACTIVITIES: _____

SIGNATURE OF APPLICANT: _____

You may attach another sheet for your resume, if needed.

Copies of this application may be reproduced.

ADULT LEADERS OF GROUP RECOMMENDING:

Signature and Title

Phone

Signature and Title

Phone

Signature and Title

Phone