

KLAMATH LODGE Masonic LODGE #77 A.F. & A.M

Application for Scholarship Award

Date: _____ / _____ / _____

1. Name (Last) (First) (Middle initial)

2. Permanent Address (street) (City) (State) (Zip)

3. Sex Male Female / / () -
Date of Birth Telephone Number

4. Name of Parent / Guardian () -

Address (street) *if different than applicant* (City) (State) (Zip) Home Phone
/ /

5. School Currently Attending High School Graduation Date

() -
Address (City) (State) (Zip) Phone Number

6. Name and address of college or vocational school for which applicant's scholarship is requested () -

Address (City) (State) (Zip) Phone Number

Community/Junior College (associates degree only) Community/Junior College (plans to transfer to a four-year college to complete bachelor's degree)
 Vocational/Technical Accredited Yes No Four-year College to complete bachelor's degree

7. Student is: accepted Pending Enrolled

Full time Half time or more Less than half time

Will live: On campus Off campus Will commute

8. Subject area applicant is pursuing:

9. Employer and Occupation of Guardian:

*10. Name of Relative in the Masonic Family

Lodge # Relationship to you

*not necessary

11. Your Work History:

Describe your work history during the past four years. Indicate dates of employment in each job, and approximate number of hours worked each week. List total amounts earned at each job.

Position	Date From (MM/YY)	Date to (MM/YY)	Hours Per Week	Amount Earned

12. List all school activities in which you have participated during the past 4 years. (e.g. student government, music, sports, etc.) . List all community activities in which you have participated without pay during the past 4 years (e.g. Red Cross, church work, volunteer work, etc.). Indicate all special awards and honors.

Activity	# of years practice	Special Awards, Honors	Activity	# of years practice	Special Awards, Honors

13. Write a brief Paragraph describing your educational plans as they relate to your career objectives and future goals.

14. Please report any unusual family or personal circumstance the have effected your school activities, work experience or achievement in school, and/or what effect this scholarship will have on you.

15. Please list below the name and amount of any scholarships or grants that you have been awarded for the coming school year.

	Source	Amount received or sought	Granted	Pending
A.				
B.				

Applicant Appraisal

This appraisal must be completed by a counselor or instructor of the applicant.

To the Appraiser:

You have been asked to provide information in support of the scholarship application. In fairness to the student, we ask you to give immediate and serious attention to the appraisal.

A. Period of time you have known the applicant _____

B. How well have you know applicant? Very Well Fairly Well Limited Contact

C. Please rate the student from one to four on the following items (one is the lowest and four is the highest).

	1	2	3	4
1. Based on the applicant's ability and capabilities, the applicant has made a whole and realistic choice for a post-secondary educational program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. This applicant exhibits a strong commitment to educational goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The intended course of studies will prepare this applicant for future career plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. This applicant has contributed to school and/or community activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Achievement of performance records reflect this applicants abilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. This applicant is able to cope with the demands of future academic requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. This applicant's career choice is realistic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. This applicant's attitude will be an asset to educational and career plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Your expectation of this applicant's academic success.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Your expectation of this applicant's success.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D. Unusual circumstance or factor which you feel warrant special attention:

E. Student's rank in class _____ Class size _____ Cumulative GPA _____ (4.0 scale, unweighted).
Please include a current transcript.

Appraisers Signature _____ Title _____

Date _____ Address _____ Telephone # (____) _____ - _____

<p><u>Fully completed Application must Be Received by mail</u> <u>No later than 5/12/24</u></p>

<p>To: Scholarship Committee Steven Baker 4143 Adelaide Ave. Klamath Falls, OR 97603</p>
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In submitting this application, I certify that the information is complete and accurate to the best of my knowledge.

Applicants Signature _____ Date _____