

Application for Eastern Star Training Award for Religious Leadership Scholarship

Applicant's Name: _____
(Last) (First) (Middle)

Applicant's Address: _____
(Street) (City) (State) (Zip code)

Parent or Guardian:
Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip code)

PLACE
SMALL
PHOTO
HERE

Occupation: _____ **Email Address:** _____

Church Affiliation: _____

Pastor's Name: _____

Address: _____

Three References:

1. _____
(NAME AND ADDRESS) (PROFESSION)

2. _____
(NAME AND ADDRESS) (PROFESSION)

3. _____
(NAME AND ADDRESS) (PROFESSION)

Schools Attended:

Grand School: _____

High School: _____

College*: _____

**Applicant must have two (2) years of college credits before application for ESTARL Scholarship will be considered.*

Transcript of credits MUST accompany application.

Institution Planning to Attend:

Name: _____

Address: _____

Type of Religious Training Desired:

- ☐ Minister
- ☐ Missionary
- ☐ Director of Church Music
- ☐ Director of Religious Education
- ☐ Other form of Religious Work (Explain)

The Order of the Eastern Star
does not discriminate on
the basis of race, color,
national or ethnic origin
or religious belief in the
administration of its
scholarship program.