**Grand Chapter of Wyoming**

**Order of the Eastern Star**

**Youth Scholarship Application**

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| **APPLICANT’S NAME:** |  |
| **Date of Birth:** |  |
| **Address:** |  |
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| **Phone:** |  | **E-Mail** |       |
| **Attachments to include:** |
|  **Autobiographical letter containing reasons for requesting financial aid, your educational** |
| **experiences and goals, and work experience. Additional information which may aid** |
| **in evaluation by the Scholarship selection committee should be included.**  |
|  **Minimum of two (2) current letters of recommendation from adults not related to you.** |
|  **Transcript of Grades:** |
|  **Graduating Seniors: High School Transcript** |
|  **College Students: College Transcript** |

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| **Applicant MUST be a relative of a member of a Masonic Lodge or Order of the Eastern Star.**  |
| (Various appendant bodies such as, but not limited to, York Rite, Scottish Rite, Shrine, Daughters  |
| of the Nile, etc. are based on membership in, or a relative of a member of, a Masonic Lodge.) |
| **Name of Masonic Relation:**  |       |
| **Relation is a Member of Lodge/Chapter:** |  |
| **Relationship to Applicant:** |  |
| **Are you now, or have you been a member of a Masonic body?** Please explain  |
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| **EDUCATION:** List all High Schools, Vocational Schools and Colleges attended and dates of enrollment: |
| High School: |       | Dates of Enrollment: |       |
| Graduation Date: |       | GPA: |       |
| Post High School: |       | Dates of Enrollment: |       |
| Graduation Date: |       | GPA: |       |

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| **COLLEGE OR VOCATIONAL SCHOOL APPLIED TO / ACCEPTED:** |
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| 1st Choice: |       | Annual Tuition: |       |
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| 2nd Choice: |       | Annual Tuition: |       |
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| Full or part-time student: |       | Major: |       |
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| Degree: |       | Years of education required: |       |
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| List other Scholarships applied for and/or received. Please give details: (Attach extra pages as needed): |
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| Applicant Father’s Name: |       |
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| Occupation: |       |
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| Applicant Mother’s Name: |       |
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| Occupation: |       |
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| Siblings and Ages |       |
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| Annual Family Income: |       |
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| **HONORS, AWARDS, SPORTS, CIVIC ACTIVITIES (attach additional sheets as necessary):** |
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| **DEADLINE: June 15, 2019** |
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| Please mail the completed application to: |
| Kathy Wiekhorst |
| O.E.S. Youth Scholarship Chair |
| 180 Cedar Street |
| Green River, WY 82935 |
| 307-389-8073 (cell) 307-875-7269 (home) |

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| Applicant’s Signature: |  | Date: |  |

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| **TO BE COMPLETED BY HIGH SCHOOL/POST HIGH SCHOOL EDUCATION INSTITUTION** |
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| Applicant Name: |  |
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| GPA: |  |
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| Comments: |
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| **School:** |  |
| **Address:** |  |
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| **Signature:** |  |
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| **Title:** |  |