

**Committee Use Only**  
(Do not write in the space below)

Return Envelope  
Citizenship  
Photo  
Signed  
Goals  
Tax Form  
GPA  
SAT  
Ltr. of Acc.  
Official Transcripts  
Ltr. of Rec.

**Grand Chapter of California  
Order of the Eastern Star**

Name: \_\_\_\_\_  
(last) (first) (middle name/initial)

Home Address: \_\_\_\_\_  
(street / P.O. Box)

\_\_\_\_\_  
(city) (county)

\_\_\_\_\_  
(state) (ZIP) (area code) (phone number)

Are you a previous recipient?  No  Yes - Year: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**2006 SCHOLARSHIPS**

**PLEASE READ CAREFULLY AND FOLLOW ALL INSTRUCTIONS**

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. Scholarship awards shall be given to members of the Order of the Eastern Star and to others who fall into one of the following categories: (1) graduating high school students, (2) those who have not been able to go directly into college from high school and (3) those who have completed a portion of their higher education and find themselves in need of aid to continue. Awards will be made on the basis of scholastic record, financial need, the need of higher education, and the character of the applicant.

Scholarship Applications MUST, WITHOUT EXCEPTION, **be postmarked no later than SATURDAY, March 11, 2006.**

**QUALIFICATIONS :**

1. 3.0 minimum grade point average (GPA) UNWEIGHTED.
2. Applicant must be a citizen of the United States of America and a California resident.
3. Scholarships will be awarded for attendance at an accredited college/university, community college, trade school or religious school. Consideration will be given to applicants applying for out-of-state schools.

**INSTRUCTIONS TO APPLICANT:**

1. It is the applicant's responsibility to include all of the following, in a 9"x12" envelope, in one mailing, per the instructions on page 7.
  - a. Application form, mechanically completed and signed.
  - b. An original color photograph of applicant must be attached to the application form in the space provided.
  - c. If you are a naturalized citizen, supply proof of citizenship.
  - d. A copy of pages 1 and 2 only of this year's federal income tax return for yourself, if financially independent, or, that of your parents, if they claim you as a dependent (W2 forms will not be accepted).
  - e. Current *Report on Applicant by Administrator, Counselor, Instructor/Professor* form, page 6 of application, together with a personal letter of recommendation in a sealed envelope.
  - f. A copy of acceptance letter/proof of acceptance from the institution you plan to attend.
  - g. An official transcript of high school record, including the first semester of the twelfth grade, if graduating high school student. If a college/university student, include a complete official college transcript. All transcripts must be in an envelope sealed by the providing institution.
  - h. Applications must be mailed to the address provided on page 7 of this application.
2. Spelling and grammatical errors on the part of the applicant will make an unfavorable impression.
3. The Scholarship Committee must receive the appropriate documents for the fall term before any award may be forwarded to the applicant.
4. If you would like to be notified of the rejection of your application, you must include a self-addressed, stamped envelope with the completed application.



9. Have you applied for other scholarships, loans or grants?  Yes  No If yes, please list:

10. Are you a member of a high school or college scholarship society?  Yes  No If yes, please list:

11. Please list school honors, student body offices held, and your current extra curricular activities:

12. Masonic Affiliations:

Are you a member of the Order of the Eastern Star?  Yes  No

If yes, state Chapter name and number: \_\_\_\_\_

Are your relatives (parents, grandparents, aunts, uncles, etc.) members of the Order of the Eastern Star?  Yes  No

If yes, state name(s), relationship, Chapter name and number:  Yes  No

Yes No

Are you a Masonic Youth?  Yes  No Which Order? \_\_\_\_\_

13. What service have you given to your community?

14. If you are applying for an ESTARL (religious) scholarship, list the service you have given to your church, synagogue, or religious organization.

Date: \_\_\_\_\_ SIGNED \_\_\_\_\_  
(applicant)

Date: \_\_\_\_\_ SIGNED \_\_\_\_\_  
(Parent or Guardian - if using parent's tax form)

**In the space provided below, write paragraphs of several sentences each discussing the following:**

Educational Goals:

Reason for Choice of School:

Reason for Applying for Financial Aid:

**Please complete the following:**

What is the date and time of your school's Awards Ceremony?

What is the address of your school?

Where (location) does your school hold its Awards Ceremony?

Name and phone number of the school personnel to be contacted by the Scholarship Committee regarding the Awards Ceremony?

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(date) (time)

(street)

(city) (state) (ZIP)

---

(location)

---

(name)

---

(area code) (phone number)

## Financial Statement

**Annual Family Gross Income (all sources)**

**(If living with parents)**

Father \_\_\_\_\_  
 Mother \_\_\_\_\_  
 Self \_\_\_\_\_  
 Other: rents, interest,  
 dividends, etc. \_\_\_\_\_  
  
**Total** \_\_\_\_\_

**Annual Family Expenses: (per year)**

(Your own if independent, your parent or parents if living with them. Do not list state or federal taxes.)

Mortgage/Rent \_\_\_\_\_  
 Property Taxes \_\_\_\_\_  
 Utilities \_\_\_\_\_  
 Food \_\_\_\_\_  
 Clothing \_\_\_\_\_  
 Auto(s) Expenses \_\_\_\_\_  
 Medical/Dental \_\_\_\_\_  
 Contributions \_\_\_\_\_  
 Entertainment \_\_\_\_\_  
 Travel \_\_\_\_\_  
 Other (Explain in note 2 below.) \_\_\_\_\_  
  
**Total** \_\_\_\_\_

**(If living independent of your parents)**

Self \_\_\_\_\_  
 Spouse \_\_\_\_\_  
 Other: rents, interest,  
 dividends, etc. \_\_\_\_\_  
  
**Total** \_\_\_\_\_

**ATTACH COPY OF FEDERAL INCOME TAX FORM  
 (PAGES 1 AND 2 ONLY)**

**Funds Available Annually**  
 (all sources for applicant's education)

Parents \_\_\_\_\_  
 Scholarships \_\_\_\_\_  
 Grants \_\_\_\_\_  
 Loans \_\_\_\_\_  
 Self \_\_\_\_\_  
 Other (Explain in note 1 below.) \_\_\_\_\_  
  
**Total** \_\_\_\_\_

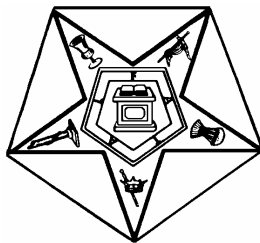
**Approximate Annual College Expenses**

Tuition \_\_\_\_\_  
 Fees (not included in tuition) \_\_\_\_\_  
 Books & Supplies \_\_\_\_\_  
 Room & Board \_\_\_\_\_  
 Transportation \_\_\_\_\_  
  
**Total** \_\_\_\_\_

Note 1.

Note 2.

Provide below other financial information not indicated above. This includes indebtedness due to illness, other family members in college, and aid to grandparents. You may use additional pages, if necessary. If this information is continued, please so indicate.



**GRAND CHAPTER OF CALIFORNIA  
ORDER OF THE EASTERN STAR**

**REPORT ON APPLICANT BY  
ADMINISTRATOR, COUNSELOR, INSTRUCTOR / PROFESSOR**

To Whom It May Concern:

The Scholarship Committee of the Grand Chapter of California, Order of the Eastern Star, desires information, as requested below, concerning the qualifications of:

\_\_\_\_\_ (name of student)

who has applied for a scholarship. Any information you provide will be treated as confidential. **Please give this report together with letter of recommendation, in a sealed envelope to the applicant.** Thank you.

1. How long did the applicant attend your institution? \_\_\_\_\_

2. On what do you base your evaluation of the applicant? (Please check the appropriate items.)

- Personal acquaintance                       Reports of instructors                       Personal observation
- Casual acquaintance                       School records                       Other \_\_\_\_\_

3. Test record:      SAT:              Verbal \_\_\_\_\_                      Math \_\_\_\_\_                      Total \_\_\_\_\_

                            ACT:              Verbal \_\_\_\_\_                      Writing \_\_\_\_\_                      Math \_\_\_\_\_

4. GPA (unweighted): \_\_\_\_\_ Rank in Class: \_\_\_\_\_ Number in Class: \_\_\_\_\_

5. Please indicate your personal rating of the applicant by appropriately placing check marks:

Rating	Scholarship	Citizenship	Leadership	Personality
Excellent				
Good				
Fair				

After completing the above, please write a letter of recommendation for this student. Place both this form and the letter in a sealed envelope and give it to the applicant. Lack of a letter will eliminate this student's application.

Scholarship Committee Members  
Mailing Addresses and Contact Information

DO NOT COPY THIS PAGE

Mail application to:

Grand Chapter of California  
Order of the Eastern Star  
Attn: Scholarship Committee  
16960 Bastanchury Road, Suite E  
Yorba Linda, CA 92886-1711

Contact Information:

Chairman:

Janice McPherson  
e-mail: [mcpersonjl@csus.edu](mailto:mcpersonjl@csus.edu)