

**SHERWOOD & EVELYN KRESIN MEMORIAL  
SCHOLARSHIP APPLICATION**

Scholarship applicants must reside in the state of Illinois and must have a cumulative grade point average (GPA) of at least 3.0 (B) on a scale of 4 or a 4.0 (B) on a scale of 5.

Scholarships will be awarded only to full-time students (twelve semester hours or more) enrolled in an accredited college or university in the state of Illinois or in a state contiguous to Illinois.

Scholarship eligibility shall be based primarily on scholastic merit as evidenced by academic performance. Applicants shall be judged equitably without regard to race, ethnicity, religion, gender, age or handicap.

Scholarship applicants may pursue any academic field of undergraduate or graduate study without restriction.

Scholarships may be awarded for a maximum of 4 years.

Scholarship applications must be submitted no later than **April 1<sup>st</sup>** of the year in which the scholarship is to be awarded. All applications and accompanying data such as transcripts and letters of recommendation shall become the property of the Illinois Scottish Rite Scholarship Fund.

Scholarship recipients desiring to renew their scholarships for the ensuing year must forward a letter of intent and a transcript of grades verifying continued eligibility to the Scholarship Chairman no later than **April 1<sup>st</sup>**.

Scholarships will be awarded or renewed at the discretion of the Scholarship Committee at its annual meeting in June.

Scholarship checks shall be forwarded each year to the recipient's college or university to be credited to his or her tuition and fees account.

This application, official transcripts and letters of recommendation should be forwarded to:

**Return by April 1<sup>st</sup> to:**

**Valley of Springfield, AASR  
Attn: Executive Secretary  
1020 Rickard Road  
Springfield, IL 62704-1096**

Name: \_\_\_\_\_  
 (Last) (First) (Middle)

Home Address: \_\_\_\_\_  
 (Street)

\_\_\_\_\_  
 (City) (State) (Zip Code)

Phone Number: \_\_\_\_\_ S.S. #: \_\_\_\_\_

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Name of Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Position: \_\_\_\_\_ Position: \_\_\_\_\_

Annual Income: \_\_\_\_\_ Annual Income: \_\_\_\_\_

Number of Dependents in Family: \_\_\_\_\_

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Name of Spouse: \_\_\_\_\_

Position: \_\_\_\_\_ Annual Income: \_\_\_\_\_

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Please indicate your anticipated income and expenses for the ensuing college years:

<b>Income</b>	<b>Yr. 1</b>	<b>Yr. 2</b>	<b>Yr. 3</b>	<b>Yr. 4</b>	<b>Expenses</b>	<b>Yr. 1</b>	<b>Yr. 2</b>	<b>Yr. 3</b>	<b>Yr 4</b>
From Savings					Tuitions & Books				
From Employment					Room Rent				
From Loans					Meals				
From Family					Clothing				
From Scholarships					All Others				
<b>TOTAL</b>					<b>TOTAL</b>				

**ACADEMIC PREPARATION  
SECTION A**

High School attending: \_\_\_\_\_

Address: \_\_\_\_\_

ACT Score: \_\_\_\_\_ SAT Score: \_\_\_\_\_

Class Rank: \_\_\_\_\_ out of \_\_\_\_\_ Grade Point Average \_\_\_\_\_ out of \_\_\_\_\_  
(number) (class size) (number) (maximum)

Academic Honors: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SECTION B – MUST BE COMPLETED**

College I plan to attend: \_\_\_\_\_

Address: \_\_\_\_\_

Major Field of Study: \_\_\_\_\_

Minor Field of Study: \_\_\_\_\_

Academic Status as of next Sept: \_\_\_\_\_  
(Freshman, Sophomore, Junior, Senior)

Academic Honors: \_\_\_\_\_

\_\_\_\_\_

Offices Appointed/Elected to: \_\_\_\_\_ year \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ year \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ year \_\_\_\_\_ to \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ out of \_\_\_\_\_  
(number) (maximum)

Extracurricular school related interests and activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Please send an official copy of your academic transcript, two references from professors and a personal recommendation by **April 1<sup>st</sup>**.

Give a brief narrative about why you have chosen to enter this career field:

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**References:** Please submit three references. Two of the references must be from professors knowledgeable about your academic studies, or high school teachers, depending on your present academic status.

I authorize the school in which I am enrolled in academic year 20\_\_ - 20\_\_ to disclose to the Scholarship Chairman of the Illinois Masonic Scottish Rite Scholarship Fund any and all matters pertaining to my financial situation, aid and grades.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

**RETURN BY APRIL 1<sup>ST</sup> TO:  
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Attn: Executive Secretary  
1020 Rickard Road  
Springfield, IL 62704-1096**

**SHERWOOD & EVELYN KRESIN MEMORIAL SCHOLARSHIP**

**Professional Letter of Recommendation**

This section to be completed by the Applicant:

Name of Applicant: \_\_\_\_\_ Social Security # \_\_\_\_\_

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*Please rate the applicant. Compare with others of like age and position.*

	Upper 5%	Upper 10%	Upper 25%	Upper 50%	Lower 50%	No Basis for Judgment
Intellectual achievement						
General knowledge						
Oral expression						
Written expression						
Working with others						
Emotional maturity						
Imagination / creativity						

General assessment of overall academic ability: Of the approximately \_\_\_\_\_ students at a comparable education level that I have know in recent years, I would rate this applicant in the upper \_\_\_\_\_ percent.

In addition, please write a statement on the reverse side indicating your opinion of the applicant's ability to pursue studies and to achieve professional success in his or her chosen field. Any pertinent information is valuable, but an evaluation of strengths and weaknesses is more helpful than general praise.

Name \_\_\_\_\_ Signature \_\_\_\_\_

Position \_\_\_\_\_ Address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Dates \_\_\_\_\_

Date \_\_\_\_\_

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Name \_\_\_\_\_ Signature \_\_\_\_\_

Position \_\_\_\_\_ Address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Dates \_\_\_\_\_

Date \_\_\_\_\_

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**SHERWOOD & EVELYN KRESIN MEMORIAL SCHOLARSHIP  
Personal Letter of Recommendation**

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This section to be completed by the Applicant:

Name of Applicant \_\_\_\_\_

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

\*\*\*\*\*

Please write a statement below indicating your opinion of the applicant's ability to pursue studies and to achieve professional success in his or her chosen field. Any pertinent information is valuable, but an evaluation of strengths and weaknesses is more helpful than general praise.

Name \_\_\_\_\_ Signature \_\_\_\_\_

Position \_\_\_\_\_ Address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Dates \_\_\_\_\_

Date \_\_\_\_\_

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