



## APPLICATION FOR ABBOTT SCOTTISH RITE SCHOLARSHIP AID

Application to be personally completed by applicant, submitted in duplicate and received by March 1st in Valley Secretary's Office. Any application received after that date cannot be considered for the ensuing academic year.

Return to Valley Secretary:

*(please type or print)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Street Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Home City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

1. Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

2a. Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

2b. Mother's or Father's address (if different than above): \_\_\_\_\_

3a. Is your father a Master Mason (Yes or No)? \_\_\_\_\_

3b. Is your father a Scottish Rite Mason (Yes or No)? \_\_\_\_\_  
If Yes, Valley: \_\_\_\_\_ Member No: \_\_\_\_\_

3c. Is your grandfather a Master Mason (Yes or No)? \_\_\_\_\_

3d. Is your grandfather a Scottish Rite Mason (Yes or No)? \_\_\_\_\_  
If Yes, Valley: \_\_\_\_\_ Member No: \_\_\_\_\_

3e. If grandfather is a Scottish Rite Mason, indicate name: \_\_\_\_\_

3f. Are you a graduate of the 32<sup>o</sup> Masonic Learning Center? \_\_\_\_\_ Director: \_\_\_\_\_

4a. To what youth organization affiliated with Freemasonry do (have) you belong(ed)? (DeMolay, Rainbow/ Job's Daughters, other)?  
\_\_\_\_\_

4b. To what other non-school related groups do you belong? \_\_\_\_\_

4c. State briefly your extracurricular school-related interests and activities?  
\_\_\_\_\_

5a. Name of accredited school to be attended: \_\_\_\_\_ Major: \_\_\_\_\_

5b. Address of school: \_\_\_\_\_

6. Student Social Security Number: \_\_\_\_\_ 7. Which Class will you be entering? \_\_\_\_\_

8. Adjusted Gross Family Income as reported to the IRS: \_\_\_\_\_

9. Indicate amount of aid anticipated from sources other than family (grant, loan, job, other scholarship): \_\_\_\_\_

10. Provide an estimate of yearly financial needs:

Tuition: \$ \_\_\_\_\_  
Maintenance: \$ \_\_\_\_\_  
Other: \$ \_\_\_\_\_  
Total: \$ \_\_\_\_\_

11. Present Sources of Income for School:

Job: \$ \_\_\_\_\_  
Loan: \$ \_\_\_\_\_  
Scholarship: \$ \_\_\_\_\_  
Grants: \$ \_\_\_\_\_  
Other Revenues: \$ \_\_\_\_\_  
Total: \$ \_\_\_\_\_

*Vocation:*

12a. For what career are you planning? \_\_\_\_\_

12b. If Undecided, indicate possible choices: \_\_\_\_\_

13a. How many children in your family? \_\_\_\_\_ Ages: \_\_\_\_\_

13b. How many children in your family are attending college: \_\_\_\_\_

14. Additional Information you wish to be considered: \_\_\_\_\_

15. Previous Abbott Scholarship recipient? (years) \_\_\_\_\_ Or New Applicant: (yes) \_\_\_\_\_

Please submit the following documentation with the application (*in duplicate*):

- a. Most current copy of high school or college transcript
- b. At least one confidential letter or recommendation from an instructor, counselor or advisor
- c. Most current copy of FAFSA form
- d. Copies of SAT, ACT or GRE results

I believe the foregoing statements to be accurate. I hereby pledge any Abbott Scholarship monies awarded to me will be used strictly for college expenses such as tuition, supplies and room and board.

Date: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

Abbott Scottish Rite Scholarship aid is a gift, not a loan, and can be based on academic achievement, participation in worthwhile activities, financial need, and self help. Checks will be issued by August 1<sup>st</sup> to successful applicants drawn payable to the student recipient.

DEPUTY AND COMMITTEE USE ONLY			
Approved by the Valley Committee (name & date): _____			
Approved by the State Committee (name & date): _____			
Approved by the Deputy (name & date): _____			
Amount granted: _____	Payable to: _____		
Check to be sent (select):	Deputy: _____	State Selectman Committee: _____	or Valley Secretary: _____