GRAND CHAPTER OF RHODE ISLAND ORDER OF THE EASTERN STAR EDUCATIONAL/ESTARL SCHOLARSHIP APPLICATION 2024

Only applicants with a **GPA of 2.50 or higher** will be considered for a scholarship.

All applications with all supporting documentation must be received on or before **midnight**, **May 15**, **2024**, to be considered. Email applications are encouraged but not required.

Applicants for FIRST-TIME Education/ESTARL Scholarship, regardless of year attending, must have the following attachments:

- 1. Completed Application
- 2. An unofficial transcript of grades or a copy of the most recent semester report, *if attending a two -year college*, must be filed with the committee on or before the May 15 deadline.
- **3.** A typed, double-spaced essay responding to the prompt given (see attached).
- **4.** A copy of the tuition bill issued by the bursar of the Institution of higher learning as proof of need.

If you have been denied a scholarship in the past and are reapplying, you must apply as a first-time applicant.

Recipients of previous Education/ESTARL Scholarships require the following:

- 1. Completed Application
- 2. An unofficial transcript of grades or a copy of the most recent semester report, *if attending a two- year college*, must be filed with the committee on or before the May 15 deadline.
- 3. A typed, double-spaced essay responding to the prompt given (see attached).
- 4. A copy of the tuition bill issued by the bursar of the Institution of higher learning as proof of need.

All applications with all supporting documentation must be received on or before midnight, May 15, 2024, to be considered. Email applications are acceptable but not required.

The committee reserves full right of decision on scholarship qualifications based on scholastic performance, need of financial assistance, and other pertinent information provided by the student. Awards may be variable in an amount determined by the Education and ESTARL Committee on the basis of fund availability, number of applicants, academic performance, and financial need of the individual. Awards, when granted, will be paid directly to the applicant to be used for books, tuition, board, or other school related expenses.

The requirements of this application must be completed in their entirety and submitted to the Education and ESTARL Committee along with all attachments as listed in the regulations. The application must be **RECEIVED NO LATER**THAN MIDNIGHT, May 15, 2024. The name and address of the Education and ESTARL Committee contact person is given on the cover letter. Please type or print all information. Be sure to sign the application.

The following questions will be answered truthfully and to the best of my knowledge. I shall use whatever grant I receive in the best interest of my continuing education.

Signature of applican	t	Date	-		
Name:					
Telephone number:					
Street:			City:	State:	
Zip Code:	Email:		-		

ESTARL APPLICANTS NEED $\underline{\mathbf{NOT}}$ COMPLETE * QUESTIONS

*Are you a member of the Order of the Eastern Star or a If yes, Name of Chapter or Lodge and Number: Address of Chapter or Lodge: Offices held:			
Offices held: *Are you or have you been a member in good standing of Rain If yes, the Name of Assembly or Chapter and Nu Address of Assembly or Chapter Offices held:	umber		
*If you are not a member of Eastern Star, a Masonic Loc sponsoring member (i.e. son/daughter/granddaughter, etc.)			our relationship to the
*Give your sponsor's name, Chapter/Lodge and Number	r		
PERSONAL DATA 1. Date of Birth:			
 Marital Status:SingleMarried How many dependent children do you have? Numbe (Skip if not applicable) 	r: Ages: _		_
 4. Have you previously been awarded a Rhode Island Eastern 5. Have you applied for, but did not receive a Rhode Island E SECONDARY EDUCATION (if completed within th 1. High School: 	astern Star Scholarship' <u>e last five years)</u> Location:	?Yes _	No
Course of Study: Awards, extracurricular activities			
COLLEGE/UNIVERSITY INFORMATION		.	
Name of college presently attending: Are you applying for assistance for yourSophomore Graduate School? Course Major Intended accounting an appleasing.	re JuniorSenior	_ Location: yearFiftl	Year (in 5 year program)
 4. Intended occupation or profession 5. Name of college attending in the fall if different fror Location: Reason for change: 	¥ v	nding:	
CHURCH/COMMUNITY ACTIVITIES:			
COLLEGE EXPENSES, ESTIMATED INCOME AN	ND SOURCES OF I	NCOME	
College Expenses 1. Estimated Tuition \$	Sources of Income 1. Personal Savings 2. Applicant's Total 3. Parents/Spouse/P	Income\$	- cial Assistance \$

4. Transportation	\$	4. Student Loans, this year \$
5. Other	\$ \$	5. Other Scholarships, this year \$
		6. RI State Grants \$7. Federal/Other Grants \$
		/. Federal/Other Grants \$
TOTAL: \$		TOTAL: \$
A. Explain any unu	sual anticipated expenses	(College or Personal):
B. Total amount of	Student Loans incurred to	o date:
C. List names of oth	ner scholarships anticipat	ed and amounts:
		ertinent to the Committee in determining your needs for scholarship ary.)

PLEASE BE SURE THAT THE APPLICATION IS SIGNED WHERE REQUIRED, ALL DOCUMENTATION AS LISTED ON THE REGULATIONS SHEET IS INCLUDED, AND THAT THE APPLICATION WILL BE RECEIVED ON OR BEFORE MIDNIGHT, May 15, 2024.

APPLICATION CONTINUES ON NEXT PAGE WITH ESSAY PROMPT DIRECTIONS

DIRECTIONS:

- 1. On a separate sheet of paper, write a 400-500 word essay on the following subsequent prompt.
- 2. Original Essay must be typed, double-spaced.
- 3. **DO NOT** include your name or other personal information on the essay.

ESSAY PROMPT

Describe an example of your leadership experience in which you have positively influenced others, helped resolve disputes, or contributed top group time.