

MAY CHAPTER NO 62

Order of the Eastern Star, PHA 531 McPherson Street Mansfield, Ohio 44903

Danielle Saffold, Worthy Matron James K. Willis, Worthy Patron

Renae Willis, Secretary

December 15, 2015

To: Scholarship Applicant

Greetings:

May Chapter No 62, Order of the Eastern Star, Prince Hall Affiliation, is pleased to announce that we will award a \$500.00 scholarship to a deserving student to assist in their pursuit of a higher education. Our Spring award will go to a 2016 high school graduate. The Spring application deadline is **April 15, 2016**. Our Fall scholarship goes to a student who has already successfully completed at least one year (freshman) of college and is currently enrolled as a continuing student (sophomore or higher). The Fall application deadline **September 15, 2016**.

The following criteria will be considered:

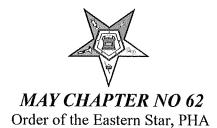
- Resident of Richland County, Ohio
- High School Graduation from within Richland County, Ohio
- Academic Performance
- Community Service
- Personal Essay
- Financial Need
- Extenuating Circumstances
- Recommendations

We are not asking for family income data, however we do need to know the estimated costs of out-of-pocket expenses. Prince Hall Grand Lodge and Amaranth Grand Chapter Order of the Eastern Star also award scholarship funds yearly in August and they do require family financial income data. The amount of the awards and the criteria vary. If you wish to apply for those funds, please check the appropriate box on the Scholarship Application Form and we will forward the related application forms to you when they are distributed to us.

Please read all of the materials carefully and adhere to the appropriate deadline. Failure to follow directions will eliminate you from consideration. If you have any questions please contact me at 419-529-4365.

Sincerely,

Carolyn J. Parker Carolyn J. Parker Scholarship Chairperson



SCHOLARSHIP APPLICATION FORM

(Please type or print legibly)

APPLICANT DATA

Telephone: (Home)	Address: Street	City	0:		
Parent/Guardian Name: Parent/Guardian Address: Street Street Number of People in immediate Family: Number of People in College HIGH SCHOOL/COLLEGE DATA Name of High School: High School Address: Street City Year of Graduation: High School Address: High School Grade Point Average: Have you been accepted by a post-secondary school? Yes If yes; give date classes will begin:		City (Cell			Zip Code
Parent/Guardian Name: Street City State Zip Colored		(000	,		
Parent/Guardian Address: Street City State Zip Co Number of People in immediate Family: Number of People in College HIGH SCHOOL/COLLEGE DATA Name of High School: Street City State Zip Co High School Address: Street City State Zip Co High School Grade Point Average: Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:	FAMILY DATA				
Number of People in immediate Family:Number of People in College	Parent/Guardian Name:			_	
Number of People in immediate Family:Number of People in College	Parent/Guardian Address:				·
HIGH SCHOOL/COLLEGE DATA Name of High School: Year of Graduation: High School Address: Street City State Zip Co High School Grade Point Average: Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:	Street	(City Number of People	State : in College	Zip Code
Name of High School: Year of Graduation: High School Address: Street City State Zip Co High School Grade Point Average: No Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:					
High School Address: Street City State Zip Co High School Grade Point Average: Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:	<u>HIGH SCHOOL/COLLEGE DA</u>	<u>TA</u>			
High School Address: Street City State Zip Co High School Grade Point Average: Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:	Name of High School:		Yes	or of Graduation	
High School Grade Point Average: Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:					
High School Grade Point Average: Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:	High School Address:			-	-
Have you been accepted by a post-secondary school? Yes No If yes; give date classes will begin:	Street High School Grade Point Average	.•	City	State	Zip Code
If yes; give date classes will begin:					
	Have you been accepted by a post	-secondary school? Ye	s No		
Name of School:	Address of School:				
Address of School: Street City State Zip Code	Street	City	State Zip Code		
	If you have already completed at l	east 1 year of post-seco	ndary studies pleaso	e complete the follo	wing:
If you have already completed at least 1 year of post-secondary studies please complete the following:	Address of School	X			
College/University Name:	Stree	et City	State Zip Cod	e	
College/University Name: Address of School: Street City State Zip Code	Date you first attended th	is school:	*		
College/University Name: Address of School: Street City State Zip Code	Your class year: Freshma	an Sophomore	Junior Senior _	Other (explain) _	
College/University Name:	V :	Crada D	aint Arrana an		

<u>Expense</u>

<u>Costs</u>

Financial Aid Received

Sources and dates received

Tuition Costs	\$	\$			
Room & Board					
Books & Fees					
Transportation					
Total					
Do you wish to rec Scholarship when	ceive an applicathey become a	ation for the Prince Hall vailable? Yes N	Grand Lodge and Lodge and Grand Lodge	nd/or Amaranth Gran	d Chapter
SUPPORTING D	<u>OCUMENTAT</u>	<u>FION</u> (all documentation	n must be receiv	red by the appropriate	e deadline)
Scholarship applic					
Applicant's photo					
		anscript (original copy w			
Letters of recomme	endation from:	High School Counselor	/College Adviso	or and/or a communit	v member

<u>PERSONAL ESSAY</u>

Personal essay (see below)

Please submit a typed statement telling us about yourself, including your accomplishments and your aspirations. Tell us why higher education is important to you. Include information about your extra activities, both school and community related. Tell us about membership in any organizations and any honors that you may have received. Include any other information that you think may be helpful to the selection committee. Your essay must be at least 100 words in length. You may use the space below or attach an additional sheet of paper.



MAY CHAPTER NO 62

Order of the Eastern Star, PHA

SCHOLARSHIP COMMITTEE

Request for confidential information: Transcript
Re:
Name of Student
Class Rank
To: Student Advisor, College Registrar, Counselor or Principal of:
High School or College/University
I am in the process of completing an application for the May Chapter No 62, Order of Eastern Star PHA Scholarship Committee. This application is for a financial assistance award. I am requesting that you please send to them an official copy of my transcript (with the school seal) My SAT or ACT test scores must be included. The deadline for receipt of transcripts is April 15, 2016 for the Spring award or September 15, 2016 for the Fall award. Your assistance will be greatly appreciated.
Signature of Student Date Signed

Please send to:

May Chapter No 62 Scholarship Committee Carolyn J. Parker, Chairperson 1231 Silver Lane Mansfield, Ohio 44906 Ph. 419-529-4365



MAY CHAPTER NO 62 Order of the Eastern Star, PHA

SCHOLARSHIP COMMITTEE

Request for confidential information: Recommendation	Counselor/Advisor/Principal Minister/Community member
Re:	
Name of Student	
School/College/Church/Organization	
I am in the process of completing an application for the May Star PHA Scholarship Committee. This application is for a requesting that you please send to them your evaluation of n interaction with others and any other pertinent information vevaluating my application. The deadline for receipt of refere award or September 15, 2016 for the Fall award. Your assistance of the process	financial assistance award. I am ny personal characteristics, talents, which would be helpful to them in
Signature of Student	
Date Signed	

Please send to:

May Chapter No 62 Scholarship Committee Carolyn J. Parker, Chairperson 1231 Silver Lane Mansfield, Ohio 44906 Ph. 419-529-4365