

INSTRUCTIONS FOR COMPLETEING APPLICATION
APPLICANT DOES NOT NEED TO HAVE ANY MASONIC AFFILIATION

1. Applicant must be a high school senior who plans to attend full-time at an accredited college, university, trade or vocational school, must reside in Michigan, and be a citizen of the United States.
2. Applicant must use the official Michigan Masonic Charitable Foundation form. This form must be signed and dated by the student and his or her parent or guardian.
3. Letters and statements must be originals on one side of an 8 ½ x 11 piece of paper, dated and signed by the author.
4. Applicant must include an official high school transcript, **certified by Marysville High School**, which includes the student's academic record from the beginning of the 9th grade to the most recent marking period. **Transcripts not obtained from and certified by Marysville High School are not considered official transcripts, and will be disregarded.**
5. Applicant must submit ACT or SAT scores. These may be photocopied if not included on the official transcript.
6. Applicant must include, with the application, his or her statement of vocational or professional goals.
7. In answering the questions on the application, extra pages may be used if necessary.
8. Application must be complete and submitted by the deadline. Incomplete or late applications will not be considered.
9. **Application must be mailed to, and be in the possession of, Marysville Eleven Lodge no later than Wednesday, April 3, 2024. Mail application to:**

Scholarship Committee

Marysville Eleven Lodge No. 498, F. & A. M.

P.O. Box 358

Marysville, MI 48040

CHECKLIST OF MATERIALS WHICH MUST BE INCLUDED WITH APPLICATION

- Two letters of recommendation from school personnel
- Two letters of recommendation from non-school personnel
- ACT/SAT test results
- Official transcript from high school
- Applicant's statement of vocational or professional goals

Michigan Masonic Charitable Foundation

Investing in a better way of life.



APPLICATION FOR SCHOLARSHIP AWARD

Please Type or Print in Ink

Application for Scholarship Award for academic year 20____ thru 20____

Case No: _____
(Office Use Only)

(Mrs., Ms., Miss, Mr.) _____
-Circle One- Full Legal Name

Tele. Number: _____

Student Address: _____
Number Street
City Zip County

High School(s) Attended: _____
Name of School City Years Attended
Name of School City Years Attended

Date of Graduation: _____ Intended Major: _____

College Choice: _____

If enrolled, College student I.D. number: _____

Father: _____ Occupation: _____
Name

Mother: _____ Occupation: _____
Name

State any other Lodge where you have turned this application in this year: _____

Signature: _____
Student

Dated: _____

Signature: _____
Parent, Guardian, or Spouse

Dated: _____

Student Name: _____

SCHOLASTIC (High School)

Academic Honors and Awards (State Year and Nature of): _____

Member of *Academic* Organization (State name of organization, year, & if position held): _____

Elective courses taken (State name of class & year, i.e.: Band 2, 3; Choir 2-4; Art 1): _____

Courses I like the most (give short explanation & any successes): _____

Courses I disliked the most (give short explanation & any successes): _____

Faculty Member who made the most impression on me and why: _____

EXTRA CURRICULAR (School Related)

Honors and Awards (State year and nature of): _____

Offices and positions of Leadership (State name of group, position, year): _____

Member of Organization where *no office* was held (State name of group, year, i.e.: Drama 2, 3. Please state only major activities): _____

EXTRA-CURRICULAR (Non-School Related)

Honors and Awards (State year and nature of): _____

Offices and positions of Leadership (State name of group/organization, position, year): _____

Member of Organization (State name of organization, year, such as: Scouts, DeMolay, Jobs, Rainbow, 4H, Junior Achievement, Etc. –state only major activities): _____

Employment: (State name of employer(s), positions held, periods of employment, average weekly hours, earnings, etc.):

Other

List all siblings and ages: _____

Have you been granted financial aid? _____ Details of the following:
a) Scholarship \$ _____ b) Federal or State Loan \$ _____
c) Pell Grant \$ _____ d) Campus Job \$ _____
e) Other Grant \$ _____ f) Other \$ _____
TOTAL FINANCIAL AID \$ _____

Have you reasons to expect financial aid from any other source? _____

If so, give details: _____

Any additional data to show financial need and general worthiness, be specific in this: _____

