



# Oregon Scottish Rite Education Foundation, Inc.

## 2019 Annual Scholarship Application

To support undergraduate study at the freshman, sophomore, junior, or senior level at an accredited college, university, or trade school.

**Applicant (Full Legal Name):** \_\_\_\_\_

### Contact Information

**Current Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **Other Phone:** \_\_\_\_\_

### Personal Background

<b>Age:</b>		<b>Oregon Residence (yrs):</b>	
<b>Citizenship:</b>		<b>US Military Service (yrs):</b>	
<b>HS Graduation (year):</b>			

List your most personally memorable extra-curricular activities (non-employment) over the past 5 years:

<b>Activity</b>	<b>General Description</b>	<b>Duration</b>

### Employment Background

Provide a brief description of your most important workplace experiences over the past 5 years:

<b>Employer</b>	<b>Duration</b>	<b>General Description of Nature of Work</b>

# Scottish Rite Educational Foundation

## **Educational Background**

Two letters of recommendation from faculty members of your most recently attended school must be submitted separately to the Foundation for review with this application.

Are you currently attending classes in an academic program? \_\_\_\_ (Y/N)

List the high school or other pre-college institution attended and the years of attendance.

Name	City, State	Years

Attach a copy of your most current academic transcript or transcripts for each school attended.

For graduating high school seniors:

Reflecting on your pre-college education, what was your most memorable academic experience or class, and why? (Attach a separate sheet of paper. Be brief and use no more than 250 words.)

For applicants entering their second or later year of college, or equivalent:

What will be your status in your next year of study? (Sophomore/Junior/Senior)

List the post high school or schools attended, the years of attendance, and your major field of study.

Name	City, State	Years	Major

Attach a copy of your most current academic transcript or transcripts for each school attended.

## **Educational Plan**

What institution and program do you plan to attend in the following academic year?

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Do you plan to attend full time in the following academic year? \_\_\_\_\_ (Y/N)

If you plan to attend less than full time, explain why. (Use a separate sheet of paper. Be brief and use no more than 250 words.)

Please describe in not more than 500 words your current career goals and argue why you merit this scholarship grant.

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## Additional Background

Are you considered a minor and dependent upon a parent or legal guardian? \_\_\_\_\_ (Y/N)

Are you legally married? \_\_\_\_\_ (Y/N)

If yes, what is the full name of your spouse: \_\_\_\_\_

Are you a single parent? \_\_\_\_\_ (Y/N)

Describe any familial connection you have with Freemasonry in Oregon:

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**Have you ever received a Scottish Rite Scholarship?** \_\_\_\_\_ (Y/N)

## CERTIFICATION:

I certify the information provided in this application is true and complete to the best of my knowledge. If requested by a qualified official, I agree to provide proof of information. Failure to do so may cause disqualification.

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

Printed Name: \_\_\_\_\_

If you are a minor, one parent or legal guardian financially responsible for you must certify endorsement of this application.

Parent or Legal  
Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Top tier applicants may be offered an interview. The student applicant agrees to bring the most recent grade transcript to the interview if it differs from the one submitted with this application.

**Cutoff date for submitting application to your Valley representative is May 1<sup>st</sup> 2019.**

BAKER HIGH SCHOOL SENIORS  
FINISHED SCHOLARSHIPS TO BE SENT TO:

SKIP WEISGERBER  
PO Box 305  
Baker City, OR 97814

BY MAY 1<sup>st</sup>, 2019