

SALEM MASONIC LODGE #4 SCHOLARSHIP APPLICATION

SPONSORING ORGANIZATION: Salem Masonic Lodge #4, Ancient Free and Accepted Masons.
1625 Brush College Rd. NW
Salem, OR, 97304
SalemLodge4scholarship@gmail.com

Return applications to the above sponsoring organization by standard mail or email by the application deadline.

ELIGIBILITY FOR SCHOLARSHIP: Anyone currently enrolled or planning to enroll in any accredited institution of higher learning or vocational training program.

AMOUNT: \$2024.00 one-time scholarship (amount increases annually by \$1.00)

APPLICATION DEADLINE: May 15 (Annually)

DATE OF SELECTION: 1st Wednesday in July, annually

DATE OF AWARD: 1st Wednesday in September at the annual Scholarship Banquet (attendance optional)

AWARD WILL BE MADE IN THE FORM OF A CHECK MADE OUT DIRECTLY TO THE INSTITUTION



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NAME

PHONE

EMAIL

DATE OF BIRTH

HOME ADDRESS

STREET

STREET LINE 2:

CITY

STATE

ZIP CODE

MAILING ADDRESS SAME AS HOME

STREET

STREET LINE 2:

CITY

STATE

ZIP CODE

ADULT:

APPROXIMATE INCOME LAST 6 MONTHS

NUMBER IN HOUSEHOLD

\$ _____

VETERAN STATUS:

VETERAN

DISABLED VETERAN

SPOUSE OR PARTNER OF DISABLED VETERAN

MASONIC AFFILIATION

BLUE
LODGE
MASTER
MASON

ORDER OF
THE EASTERN
STAR

ORDER OF
THE AMARANTH

SCOTTISH
RITE

YORK
RITE

MASONIC
RELATIVE

RELATIONSHIP

NOT
AFFILIATED

SCHOOL WHERE SCHOLARSHIP WILL BE USED _____

OCCUPATIONAL GOAL, CERTIFICATE, OR MAJOR _____

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HOW HAS YOUR LIFE EXPERIENCE PREPARED YOU FOR THIS FIELD OR WHY ARE YOU CHOOSING A NEW DIRECTION? (Tell us who you are, why you want to pursue this goal, what motivates you to succeed, how you have or will contribute to the community, what values are important to you, and/or what makes you unique?)

ESSAY ATTACHED

NOTE: Up to five (5) letters of recommendation are welcome but not required. Preference will be given to those affiliated with OR recommended by members of the Oregon Masonic Fraternity.

I HEREBY PLEDGE THAT ALL OF THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE

SIGNED:

X _____