

Brownstone Masonic Scholarship
Presented by Brownstone Lodge No. 666 F. & A. M.

2019 Scholarship Application

This is a highly competitive scholarship program and cannot be given to all who apply.

Please type application, or print in ink. Do not use pencil.

Incomplete applications and those not on this official current year application will not be considered.

ELIGIBILITY

To be eligible to receive the ***Brownstone Masonic Scholarship*** the applicant must be a High School graduate, or a High School Senior from Derry Township, Lower Dauphin or Palmyra School Districts who is pursuing a higher education. This scholarship is only applicable to undergraduate tuition and fees.

SCHOLARSHIP DETAILS

Three scholarships will be awarded. One scholarship will be awarded for each of the following school districts; Derry Township, Lower Dauphin and Palmyra School Districts. The scholarship awards will be up to \$1000.00 depending on availability of funds. Scholarship recipients may re-apply each year but receive no preference based on prior awards. Prior scholarship recipients must provide proof of G.P.A. – (a minimum G.P.A. of 3.0 is preferred). Applications must be postmarked by **April 30, 2019**.

Mail completed applications to: **Brownstone Masonic Scholarship Committee**
Attention: Shawn S. Hentz
221 Royal Rd.
Palmyra, PA 17078

We appreciate your interest in the ***Brownstone Masonic Scholarship***. It is a competitive scholarship that is awarded to those who meet the necessary criteria; community service, financial need, and academic promise and properly complete the application.

All information provided is used exclusively for determining scholarship awards. Applications are ultimately destroyed after awarding of scholarships to preserve your privacy.

The ***Brownstone Masonic Scholarship*** is maintained and presented by ***Brownstone Lodge No. 666 F. & A.M.***, Hershey, PA.

It is the policy of ***Brownstone Lodge No. 666 F. & A.M.***, to issue checks payable to the recipient, upon proof of enrollment.

PERSONAL DATA

Name

Address

City

State

Zip Code

Telephone

E-mail Address

Last 4 Digits of Social Security Number

Birth Date (mm/dd/yy)

Age

YOUR ACADEMIC RECORD

Name of High School Attended

Address

Year Graduated

Class Rank

of

Students

G.P.A.

____ Salutatorian ____ Valedictorian
Check one if appropriate

Name of College, University, Business or Trade School

Address

Class in which you will be enrolled: (check one)

- Freshman
 Sophomore
 Junior
 Senior

Current Student Status at College: (check one)

- Enrolled for next year
 Enrolled full-time
 Enrolled part-time

Major Course of Study

Minor Course(s) of Study

Do you anticipate transferring or attending a different post-secondary school yes no

If yes, list name of post-secondary school

ATTACHMENT REQUIRED: GRADE POINT AVERAGE

Please provide your cumulative grade point average for your last COMPLETED academic year (as of June): (For example: if you are a High School Senior, provide the G.P.A. from your Junior Year.) Transcripts enclosed MUST evidence this. PLEASE CIRCLE THE G.P.A. OR EQUIVALENT ON THE TRANSCRIPT.

Please provide S.A.T. scores, if not available, please explain why.

_____	_____	_____
S.A.T. MATH	S.A.T. WRITING	S.A.T. CRITICAL READING
Is the National Honor Society available at your High School	_____ yes	_____ no
Are you a member of the National Honor Society	_____ yes	_____ no

List your Community Service, Civic Activities, Non-Academic clubs, and Political and Religious organizations in which you participate: (If more room is needed please use separate sheet)

List Academic Societies and Academic School clubs in which you hold membership.
(If more room is needed please use separate sheet)

List club/organization office held/rank/honor or awards received. (If more room is needed please use separate sheet.)

YOUR FINANCIAL NEED

Do not leave any question blank. If financial information is not available, provide a reasonable estimate.

Educational expenses (per year):

How much will you contribute?

Tuition and Fees _____
Transportation _____
Room and Board _____
Books/Supplies _____

Other Expenses _____

Total Expenses _____

From Savings and Investments _____
By working during summer _____
By working during school year _____
How much will your parents/
Guardians contribute? _____
Other contributions _____

Total Contributions _____

List financial aid (scholarships and grants but not loans) which you have been approved to receive for the next academic term:

List any other expected sources of grant assistance or loans:

List names of dependent children in the family (*other than applicant*) who are **CURRENTLY ENROLLED** in a **POST-SECONDARY SCHOOL**. (DO NOT LIST PRIVATE ELEMENTARY OR HIGH SCHOOLS).

<u>Name</u>	<u>School Attending</u>
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ATTACHMENT REQUIRED: Individual Income Tax Return

In order to receive consideration you **must** attach a copy of **pages 1 and 2** of your most recently completed US Individual Income Tax Return (form 1040, 1040A or 1040EZ) **and, if you are claimed by them as a dependent, that of your parent or guardian. If you are under the age of 22, and NOT claimed as a dependent, you must attach an explanation.** All information will be held confidential, for the exclusive use of the Scholarship Committee, and will be destroyed at the conclusion of the selection process. No application will be considered without this information.

You may attach a statement providing any additional explanation of your finances that you feel might help the committee understand your current need.

CERTIFICATION

I CERTIFY THAT ALL INFORMATION CONTAINED HEREIN, OR ATTACHED, IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature of applicant

Date

Applications must be postmarked no later than April 30, 2019