



## Grand Chapter of Kansas Order of Eastern Star Scholarship Application

Name \_\_\_\_\_  
Last First Middle and/or Maiden

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_ Single \_\_\_\_ Married \_\_\_\_

Classification next Fall: Freshman \_\_\_\_ Sophomore \_\_\_\_ Junior \_\_\_\_ Senior \_\_\_\_

Total College Hours completed by next Fall: \_\_\_\_ Major: \_\_\_\_\_ Minor: \_\_\_\_\_

I will be attending \_\_\_\_\_ (Institution)

Institution Address \_\_\_\_\_  
Street City Zip Phone

Your address while attending school \_\_\_\_\_  
Street City Zip Phone

Home Address \_\_\_\_\_  
Street City Zip Phone

Date of first college enrollment: \_\_\_\_/\_\_\_\_/\_\_\_\_ at \_\_\_\_\_  
University or College

Have you attended other Colleges? \_\_\_\_ If so, list the Name, Location, and Dates of Enrollment

Are you receiving any other scholarships at this time? \_\_\_\_ For next year? \_\_\_\_

If yes, please name the scholarship, the amount received and the year received.

Are there any other members of your immediate family attending school? \_\_\_\_ If so, how many? \_\_\_\_

Elementary \_\_\_\_ Middle \_\_\_\_ High School \_\_\_\_ College \_\_\_\_

Are you a member of one of the following Youth Organizations?

International Order of the Rainbow for Girls \_\_\_\_ Jobs Daughters \_\_\_\_ DeMolay \_\_\_\_

Age when you joined the group \_\_\_\_ Number of years of active service in this youth group \_\_\_\_

**Are you a member of the Eastern Star or Masonic Lodge?** \_\_\_\_

**Chapter/Lodge** \_\_\_\_ **Location** \_\_\_\_

Other family members in Eastern Star or the Masonic Lodge

Name	Circle... Mother / Father / Grandparent	Chapter/Lodge	Location
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For your application to be considered, ALL questions must be answered completely

**All requirements must be in the possession of the executive secretary of the Scholarship Committee by June 15.**  
**(Not responsible for late or mis-directed mail)**

Return to: Grand Chapter of Kansas Order of the Eastern Star  
Scholarship Committee c/o Executive Secretary  
221 SW 33<sup>rd</sup> St. Suite 300  
Topeka, KS 66611

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant