

**Prince Hall Grand Chapter of Hawaii**

**Order of the Eastern Star**

**EASTERN STAR SCHOLARSHIP GRANT REQUIREMENTS**

**Each year the Eastern Star Scholarship Fund Committee of the Grand Chapter of Hawaii will award scholarships. These scholarships are to be used for tuition and books ONLY and are available to full-time students.**

**ELIGIBILITY**

**1. You must be a resident of the State of Hawaii or t**he child, legally adopted child, step-child, grandchild, widow, wife, sister or mother of a member of the Order of the Eastern Star or a Mason who’s membership is in the State of Hawaii.

**or**

2. Any student in need of assistance enrolled as a full-time student that is a resident of the State of Hawaii.

3. You must be enrolled as a **full-time undergraduate student** (as defined by the institution you attend) in an accredited state or private college, community college or vocational school.

4. You must be maintaining a ***minimum 2.5 grade point average*** (using the 4.0 system). A vocational or trade school must send a letter verifying grades if a system other than the 4.0 system is used.

5. **You must reapply for additional scholarships each year as additional scholarships are NOT automatic.**

**FORM REQUIREMENTS AND CHECKLIST**

**\_\_\_\_\_\_\_\_\_\_\_\_\_First time applying \_\_\_\_\_\_\_\_\_\_\_\_\_\_Re-applying**

 A. It is the responsibility of the Scholarship Applicant to complete the entire Scholarship Packet, which **MUST** be received by the Secretary of the Scholarship Committee no later than **May 16th** to be considered for the Eastern Star Scholarship. The Secretary’s address is provided at the end of these requirements.

B. Please ensure that all copies are legible.

C. Prepare a resume` of your educational and employment histories as well as church, organizations and community activities.

D. The Scholarship Recommendation Form is included with this application. Three recommendations, each using a copy of this form, are required. Each recommender should be familiar with your academic achievement, your moral character, your employment experiences, and your organizational and community activities. (The recommenders shall not be relatives, family members or students, but may include school personnel, teachers, administrators, and employers. You may also include one recommendation from a member of a Masonic organization.

1. Complete Section 1 of the Scholarship Recommendation Form before giving the form to the three individuals from whom you are requesting recommendations.
2. The forms must be filled-in completely, dated, signed and sealed by the recommender. To preserve confidentiality, each recommender should give the form, in a sealed envelope, directly to the scholarship applicant.
3. All **three (3) recommendations** must be included in the Scholarship Application Packet when it is sent to the Secretary of the Committee – **NO LATER THAN THE MAY 16th DEADLINE!** It is the Scholarship Applicant’s responsibility to get the recommendation from the person writing it.

**E. The Completed Scholarship Packet should contain the following items:**

1. Application

2. Resume

3. One page Essay

4. Three (3) Sealed Envelopes containing completed Scholarship Recommendations that the applicant has personally received from the persons writing the recommendation.

5. A sealed Transcript from your college for the quarters/semesters completed before December 31st 2013.

This Scholarship Application Packet **MUST BE POSTMARKED NO LATER THAN May 16, 2014.**

**We suggest** this packet be sent with a confirmation return that can track your scholarship application if it does not arrive on time.

**PLEASE SUBMIT ONLY THE REQUESTED DOCUMENTS**.  **Do NOT include copies of awards, membership cards, newspaper articles, etc. Reminder: Accuracy and neatness count!**  **You are competing for a limited number of scholarships. Put your best effort forward. Proofread and review your completed application before submitting it to the Committee.**

Any questions can be directed to any member of the Eastern Star Scholarship Committee or the office of the Grand , Grand Chapter of Hawaii, Order of the Eastern Star at phgchawaii@aol.com.

You will be notified by mail as to the disposition of your application. If your application is approved, the awarded monies will be sent directly to the college/vocational school by August 15th of the current year. The school will establish a fund upon which you can draw for your educational needs.

SEND ALL COMPLETED FORMS TO:

**Prince Hall Grand Chapter of Hawaii**

**P.O. Box 1236**

**Pearl City, HI. 96782**

APPLICATION FOR EASTERN STAR SCHOLARSHIP GRANT

NAME:

 *Last First Middle Age*

ADDRESS:

 *Street City State Zip*

TELEPHONE: (      )       (      )

 *Area Code Home Number Area Code Work Number*

 *Name and Address of your parents (if you are no longer living at home)*

 *Name and Address of where you are employed*

My Relationship to a Hawaii Mason or Eastern Star is (be specific):

Who is a member of:

 *Name of Chapter or Lodge # City State*

I will have completed one year of my required course study by June (This is required): [ ]  My GPA is:

My Major Field of study is:

In the Fall I will be attending:

*Mailing Address of Financial Aid Office City State Zip*

I promise to notify the EASTERN STAR SCHOLARSHIP COMMITTEE of any change in my school status (including graduation occurring before the end of the school year. Initials:

I am contributing approximately       per cent of my education expenses through work. I have received other Scholarships/Grants in the following amounts:

            $

*Organization or Institution from which money was received Date received Amount received*

            $

*Organization or Institution from which money was received Date received Amount received*

            $

*Organization or Institution from which money was received Date received Amount received*

I have read the instruction sheet. I have included my GRADE POINT AVERAGE, OFFICIAL TRANSCRIPT that has been signed and sealed by the Registrar of my school, a RESUME’ of my work and school history, three sealed RECOMMENDATIONS.

      Date

*Signature of Applicant*

My email is:

***For Committee use only: Approved / Rejected \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_ \_\_\_\_\_\_\_, \_\_\_\_\_\_\_, \_\_\_\_\_\_\_, \_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_***

 ***(****Initials of at least 3 Committee Members)*

***Voucher #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Ck#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_***

**RECOMMENDATION FOR EASTERN STAR SCHOLARSHIP**

Section 1 *(to be completed by Applicant): The Eastern Star Scholarship Fund Committee has received an application from:*

*Name of Applicant City State Zip*

*This applicant desires a scholarship for the purpose of continuing studies at:*

*Name of University City State*

Section 2 *(to be completed by Recommender):*

*Please provide your knowledge to the applicant’s character and reputation regarding leadership skills, dependability, etc. All information will be held confidential. Please feel free to use the back of this form for additional information, if needed.* ***Why would you recommend this applicant for a scholarship?***

Signed:       Date:

Title/Relationship to Applicant:

       (      )

*Full Name (Please Print) Area Code Work Number*

*Street Address City State Zip*

***Thank you for taking the time to complete this form and assisting this student.***

*Please return this form in a sealed envelope and give it directly to the Scholarship Applicant.*