



# Orange County Scottish Rite Foundation

2001 East 4th Street, Suite 202  
Santa Ana, CA 92705  
(714) 543-7277

Dear Applicant:

Thank you for your interest in the scholarship program of the Orange County Scottish Rite Foundation. We are a non-profit based in Orange County, California, and one of our primary purposes is supporting the educational endeavors of our area youth. We are funded by generous donations from the members of the Orange County Valley of the Scottish Rite of Freemasonry.

Attached is the basic scholarship application. A complete package will consist of the basic application along with other documents as indicated. Please carefully read all parts of the application and carefully complete all sections.

Your completed package will include the following:

1. The basic application;
2. A clear photograph of you;
3. Your letter of introduction, telling us about you, your educational plans, and why you think you are deserving of a scholarship;
4. Up to four (4) one-page letters of introduction;
5. A certified transcript of your SAT or ACT scores.

Be sure to clearly indicate your Masonic affiliation, as applicants must be either (a) the child of a Master Mason in good standing who resides in Orange County, or (b) a member of a Masonic youth order (DeMolay, Job's Daughters or Rainbow) who resides in Orange County. It is important that you include sufficient information for us to verify that you fit one of these categories.

If possible, please scan your completed application package and email it to:

[frosario@ocscottishrite.org](mailto:frosario@ocscottishrite.org)

We ask that, if your application is submitted in hard copy form, that you submit your completed package without any binding or stapling, as that will make it much easier for us to digitize your application for distribution to the members of the scholarship committee.

The deadline for submission is May 31, 2020.

Sincerely,  
Board of Directors  
Orange County Scottish Rite Foundation



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## ORANGE COUNTY SCOTTISH RITE FOUNDATION Scholarship Information, Criteria and Performance Requirements

**Eligibility:** California residents aged 17 to 25 seeking a degree or certificate from an accredited college, university or trade school. Awardees are to carry twelve (12) units per semester and maintain a grade point average (GPA) of 3.0 on a 4.0 scale. Units earning a Pass/No Pass grade do not count toward the twelve unit minimum.

**Award -** The annual award is \$2,500.00 paid in two equal installments as indicated below. Awards are paid directly to the awardee. An awardee may re-apply annually by the published deadline for that year. The maximum number of annual awards is four (4).

**Payment of award -** Awards will be paid to the awardee upon receipt of the following items from the awardee: (a) a certified copy of their transcript for the previous semester and (2) a grief letter describing their experience of the preceding semester, including a description of any employment, extra-curricular activities, and community involvement. These items are to be received by the last day of August in order to receive payment of the Fall installment.

**Selection -** The Scholarship Committee will read all completed applications and select recipient(s) of the scholarships. All applicants will be notified of the outcome.

**REMEMBER TO INCLUDE A PHOTOGRAPH OF YOU, ALL REQUIRED LETTERS OF RECOMMENDATION AND YOUR SAT/ACT TRANSCRIPTS**



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## 2020 SCHOLARSHIP APPLICATION

I am applying for a scholarship in order that I may attend a:  4 year accredited university  2 year accredited Junior College  a Trade or Technical College  Graduate School.

This will be my \_\_\_\_\_ year of  undergraduate  graduate study. I will be attending the following institution: \_\_\_\_\_.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
Birthplace \_\_\_\_\_ Citizenship \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

### Masonic Membership:

Please indicate your membership, if any, in a Masonic youth order, and, if applicable, your father's membership in a Masonic Lodge.

Youth Order: \_\_\_\_\_ (Chapter/Bethel/Assembly) \_\_\_\_\_ (City)

Masonic Lodge \_\_\_\_\_ (Name) No. \_\_\_\_\_ in \_\_\_\_\_ (City)

### Employment information:

Please indicate your employment, if any:

Current Employer: \_\_\_\_\_ Telephone \_\_\_\_\_

Prior Employer(s): \_\_\_\_\_ Telephone \_\_\_\_\_

\_\_\_\_\_ Telephone \_\_\_\_\_

\_\_\_\_\_ Telephone \_\_\_\_\_

Have you applied for funds from us in the past? Y/N

Have you received funds from us in the past? Y/N

If you have received funds from us in the past, please tell us when, how much, and for what purpose you received those funds: \_\_\_\_\_

\_\_\_\_\_

Education:

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Elementary School

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Location

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Middle School

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Location

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High School

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Location

Undergraduate:

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School

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Location

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Degree

Graduate:

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School

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Location

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Degree

Financial Information:

Parents Income:

_____	_____	_____
Parent Name	Parent Employer	Annual Income

_____	_____	_____
Parent Name	Parent Employer	Annual Income

Total Parents Income: \_\_\_\_\_

Your Income:

Indicate your total income and its source. If you have more than one source, please indicate the amount for each source (employment, parents, trust, Social Security, work/study wages, scholarship, student loans, etc.)

_____	_____
Source	Annual Income

_____	_____
Source	Annual Income

_____	_____
Source	Annual Income

_____	_____
Source	Annual Income

Extracurricular Activities:

If you have been involved in one or more extracurricular activities, including sports, Masonic youth groups, Scouts, Key Club, or any others, tell us about that and your experience in that activity. You can submit up to four (4), and for each, please include a letter of recommendation from a person in charge.

1.

Name of Organization or Activity	Location (City, State)	Type of activity
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Description of your experience in this organization or activity:

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2.

Name of Organization or Activity	Location (City, State)	Type of activity
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Description of your experience in this organization or activity:

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Extracurricular Activities (continued)

3.

Name of Organization or Activity	Location (City, State)	Type of activity
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Description of your experience in this organization or activity:

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4.

Name of Organization or Activity	Location (City, State)	Type of activity
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Description of your experience in this organization or activity:

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Remember, your complete package will include attachments - a photograph of you, letters of recommendation, and your SAT or ACT transcripts.