

LONE STAR GRAND COMMANDERY

Knights Templar Masons

LONE STAR GRAND GUILD

Heroines of the Templars Crusade

STATE OF TEXAS, PRINCE HALL AFFILIATION



Scholarship Application

Rules, Regulations, and Eligibility Requirements

1. The applicant shall be a graduating senior from high school or a college student at the time he/she submits this application.
2. The applicant shall show evidence of need by declaring family size and income.
3. Must have a grade point average of **2.0** or above.
4. Application for scholarship will need to be completed and submitted to the scholarship committee no later than **April 30th** of each year.
5. A high school applicant must submit a transcript of his/her high school credits, SAT/ACT scores, and a letter of recommendation on **school stationery** from a high school Counselor or a Professor. The letter of recommendation and the transcript should be in **sealed envelopes**.
6. A college student must submit a transcript of his/her college credits, GPA, and a letter of recommendation from one of their Counselors or a Professor on **school stationery**. Both the letter of recommendation and the transcript should be in **sealed envelopes**.
7. Mail completed application and recommendation to:

S.K. Clary E. Glover, Jr.
6115 Mayfair Farm
San Antonio, Texas 78244-1717



Please type all information.

Please attach photo here.

Name of Applicant: _____
Last First M.I.

Address: _____
House # Street Apt. #

_____ City State Zip

Home Telephone: _____ Work Telephone: _____

Age: _____ Date of Birth: _____/_____/_____ Social Security Number: _____

High School/College Currently Attending: _____

	<i>Mother's Information</i>	<i>Father's Information</i>	<i>Guardian's Information</i>
Name			
Home Phone			
Address			
Occupation			
Business Phone			

Number of adults and children who are dependent on parent's financial support: _____

Describe any existing conditions that are causing unusual financial expenditures for any dependents listed above (ex. illness, medical bills, support of family by one parent, etc.):

Please check the appropriate annual gross income.

\$0 to \$15,000 _____	\$45,001 to \$55,000 _____	\$75,001 to \$85,000 _____
\$15,001 to \$30,000 _____	\$55,001 to \$65,000 _____	\$85,001 to \$95,000 _____
\$30,001 to \$45,000 _____	\$65,001 to \$75,000 _____	\$95,001 and above _____

Student's Employment Record:

Business	Type of Work	# of Hours per Week	Employment Dates

Resumé

Name: _____ Telephone: _____

Address: _____

Age: _____ Birthdate: _____ High School: _____

Occupation: _____

Father's Name: _____ Mother's Name: _____

Father's Occupation: _____

Mother's Occupation: _____

Designated University: _____

Church Affiliation: _____

Organizations: _____

Career Goals: _____

I certify that all information on this application is correct.

Signature of Applicant

Date