The Grand Lodge	of Free & Accept	ed Masons of Ohio	
2017-2018 Academic Year		Scholarship Application Due to District Chairman By March 1, 2017	I
(For Committee use only: App. No)	District #	
Personal Information:			
Last Name	First Name _	MI	
Home Address			
City/State/Zip			
Email			
County Date o	of Birth	Home Ph:	
Mother's, Father's or Legal Guardi General Information:		nt from above) ude a Letter of Recommenda	
1. GPA Attested by Hig			
2. Name of accredited school to b			
3. Are you related to a member of Financial:	f the Masonic fraternity	r? Yes □ No □	
4. Adjusted gross family income re	eported to IRS for previ	ous year:	
5. Primary means of paying for co	llege, including if you v	will be working:	
6. Number of siblings living at hor	ne with you and their a	ges:	
7. Number of siblings currently in	college and their ages:		
8. Father's (Guardian's) Name		Occupation	
9. Mother's (Guardian's) Name		_ Occupation	

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If more space is needed to answer any of the following questions, please attach extra pages.

Activities:

10. To what school related organizations do you belong?

11. To what non-school related groups do you belong?

12. What community service or volunteer work have you done?

13. Please write a brief essay about why you decided to attend college or vocational. The essay should be one page in length, double spaced, and use 12 point Times New Roman font.