

# SALEM MASONIC LODGE #4 SCHOLARSHIP APPLICATION

SPONSORING ORGANIZATION: Salem Masonic Lodge #4, Ancient Free and Accepted Masons.  
1625 Brush College Rd. NW  
Salem, OR, 97304  
SalemLodge4scholarship@gmail.com

Return applications to the above sponsoring organization by standard mail or email by the application deadline.

**ELIGIBILITY FOR SCHOLARSHIP:** Anyone currently enrolled or planning to enroll in any accredited institution of higher learning or vocational training program.

**AMOUNT:** \$2024.00 one-time scholarship (amount increases annually by \$1.00)

**APPLICATION DEADLINE:** May 15 (Annually)

**DATE OF SELECTION:** 1<sup>st</sup> Wednesday in July, annually

**DATE OF AWARD:** 1<sup>st</sup> Wednesday in September at the annual Scholarship Banquet (attendance optional)

**AWARD WILL BE MADE IN THE FORM OF A CHECK MADE OUT DIRECTLY TO THE INSTITUTION**



# SALEM MASONIC LODGE #4 SCHOLARSHIP APPLICATION

NAME

PHONE

EMAIL

DATE OF BIRTH

## HOME ADDRESS

STREET

STREET LINE 2:

CITY

STATE

ZIP CODE

MAILING ADDRESS  SAME AS HOME

STREET

STREET LINE 2:

CITY

STATE

ZIP CODE

## ADULT:

APPROXIMATE INCOME LAST 6 MONTHS

NUMBER IN HOUSEHOLD

\$ \_\_\_\_\_

\_\_\_\_\_

## VETERAN STATUS:

VETERAN

DISABLED VETERAN

SPOUSE OR PARTNER OF DISABLED VETERAN

## MASONIC AFFILIATION

BLUE  
LODGE  
MASTER  
MASON

ORDER OF  
THE EASTERN  
STAR

ORDER OF  
THE AMARANTH

SCOTTISH  
RITE

YORK  
RITE

MASONIC  
RELATIVE  
\_\_\_\_\_  
RELATIONSHIP

NOT  
AFFILIATED

SCHOOL WHERE SCHOLARSHIP WILL BE USED \_\_\_\_\_

OCCUPATIONAL GOAL, CERTIFICATE, OR MAJOR \_\_\_\_\_

## SALEM MASONIC LODGE #4 SCHOLARSHIP APPLICATION

HOW HAS YOUR LIFE EXPERIENCE PREPARED YOU FOR THIS FIELD OR WHY ARE YOU CHOOSING A NEW DIRECTION? (Tell us who you are, why you want to pursue this goal, what motivates you to succeed, how you have or will contribute to the community, what values are important to you, and/or what makes you unique?)

ESSAY ATTACHED

**NOTE: Up to five (5) letters of recommendation are welcome but not required. Preference will be given to those affiliated with OR recommended by members of the Oregon Masonic Fraternity.**

I HEREBY PLEDGE THAT ALL OF THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE

SIGNED:

X \_\_\_\_\_