

✓ Checklist for ESTARL applications:

Due Dates:	
Applications	June 15
Reference letters	June 30
Grade transcripts	June 30

This is a checklist for the applicant to track that all information is being submitted. It does not need to be sent in with application.

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- Application completed in FULL
  - Financial statement -- this is part of application
  - Applicant's personal statement
  - Post-secondary education -- min of 3 yrs
  - Letter of reference - 1 of 3
  - Letter of reference - 2 of 3 (minister or church leader)
  - Letter of reference - 3 of 3 (Masonic or OES)
  - transcript of college grade for most recent completed yr
  - resident of Iowa (can attend out of State)
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# Application for ESTARL Award

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Current Address: \_\_\_\_\_

Email: \_\_\_\_\_ Your age \_\_\_\_\_ Phone # \_\_\_\_\_

Iowa address (required to show residency in Iowa): \_\_\_\_\_

\_\_\_\_\_

Summer address where you can be reached after our July Board meeting \_\_\_\_\_

\_\_\_\_\_

Have you previously received an ESTARL grant? If yes, year(s) & amount(s): \_\_\_\_\_

College name/address you are currently attending & anticipated graduation date: \_\_\_\_\_

\_\_\_\_\_

Colleges you have attended: (include Name / Location / Yrs Attended / Degree (date rec'd) / GPA):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total accumulated # of credit hours, including current year (indicate current qtr or semester): \_\_\_\_\_

College honors received and/or college student offices held: \_\_\_\_\_

\_\_\_\_\_

Religious work while in college or seminary: \_\_\_\_\_

\_\_\_\_\_

Goals of your religious training: \_\_\_\_\_

\_\_\_\_\_

Married: \_\_\_ Ages of Children: \_\_\_\_\_ Total # you are responsible for supporting (include self) \_\_\_\_\_

Spouse name, contact info and occupation: \_\_\_\_\_

\_\_\_\_\_

Father's name / address / phone # / occupation; retired; deceased : \_\_\_\_\_

\_\_\_\_\_

Mother's name / address / phone # / occupation; retired; deceased : \_\_\_\_\_

\_\_\_\_\_

Your church affiliation: \_\_\_\_\_

List any relatives who are members of Order of Eastern Star or Masonic Lodge (it is NOT a requirement that you have a family connection to the Order): \_\_\_\_\_

How did you hear about our ESTARL Award? \_\_\_\_\_

We appreciate publicity about our ESTARL program. Please list name, address, phone #, email address of person who will take responsibility of seeing that a press release is in your local paper(s) if you receive a grant: \_\_\_\_\_

## **Financial Statement**

*Please be as accurate as you can – do NOT exceed 1 (one) academic year*

### **COSTS:**

Tuition / fees \_\_\_\_\_

Spouse Tuition / fees \_\_\_\_\_

Books / Supplies \_\_\_\_\_

Room &/or Board \_\_\_\_\_

Housing/Food/Clothing \_\_\_\_\_

Utilities \_\_\_\_\_

Transportation \_\_\_\_\_

Medical / Dental \_\_\_\_\_

Debt repayment (annual) \_\_\_\_\_

Other expenses \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TOTAL COSTS:** \_\_\_\_\_

### **RESOURCES:**

Aid from applicant's family \_\_\_\_\_

Applicant's wages, after taxes \_\_\_\_\_

Wages of spouse, after taxes \_\_\_\_\_

Social Security benefits \_\_\_\_\_

Veterans benefits \_\_\_\_\_

Scholarships (identify below) \_\_\_\_\_

Loans (identify below) \_\_\_\_\_

Savings \_\_\_\_\_

Other resources (identify) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TOTAL RESOURCES:** \_\_\_\_\_

Have you applied for, or do you plan to apply for, any other scholarship awards? List name/amount:

\_\_\_\_\_  
\_\_\_\_\_

How do you plan to pay your expenses not covered by awards or scholarships? \_\_\_\_\_

\_\_\_\_\_

**Please write a short statement, which includes the following:**

- ❖ **Why you should receive an ESTARL award.**
- ❖ **What use you expect to make of this training.**
- ❖ **Other information the Board should consider.**