

Application for an ESTARL Scholarship
Eastern Star Training Award for Religious Leadership
The Grand Chapter of North Carolina, Order of the Eastern Star

Name: _____

Address: _____ Phone#: _____

Permanent Mailing Address: _____

Recommended by: _____ Chapter # _____

Date of Birth: _____ Marital Status: _____

Occupation: _____

Employer: _____

Employers Address and Phone #: _____

Annual Income: _____ Attach a copy of your most recent 1040 and/or W2

Are you a member of the Eastern Star? ____ If so, list Chapter name and #:

_____.

Parents or Spouse's Name: _____

Occupation: _____.

Address: _____ Telephone # _____

Annual Income of Parents or Spouse: _____ Attach most recent 1040 and/or W2 (Black out Social Security #)

Number of Sisters and /or Brothers: _____ Ages: _____.

With whom do you reside? _____ Address _____.

Name of College or University: _____ Major: _____

Graduate School: _____ Major: _____

In the fall I will be classified _Junior_ Senior/Pursuing a _Masters_ Doctorate

Degree sought or earned: _____

Graduation Date: _____ Attach a copy of your last Semester grades.

Of what Church are you a member: _____

Address: _____

How long have you been member? _____

What positions of leadership have you held on local, district, conference, jurisdictional, or national level: _____

List special church projects have participated in:

In what field of religious leadership do you wish to receive training?
ministry, foreign missions, church music, youth leadership,
other _____.

Indicate your reasons for choosing this vocation:

Explain fully your plans to secure this training: Colleges you plan to attend
and periods of time.

List any special recognition you have received for excellence in college,
community, or religious activities: _____

Finances:

What do you estimate your expenses to be for the next college year? _____

How much financial assistance will you be able to secure from other
sources? _____.

Will it be necessary for you to work during the school year? _____.

Have you made arrangements for such work? _____ Indicate type of work _____ and amount of remuneration. _____

Will it be necessary for you to borrow money in order to meet your expenses? _____ If so from whom do you plan to negotiate the loan? _____

Have you received any other Scholarships? _____ If so from where and in what amounts: _____

Name at least three references: (Do not list Pastor or High School Principal)

Name	Address	Occupation
_____	_____	_____
_____	_____	_____
_____	_____	_____

Financial Aid Office of the College/University: _____
Officer: _____ Address: _____

Phone # _____

Do you agree that the money which you may receive from this Scholarship can be used ONLY for the purpose of securing training in the field of religious leadership as outlined in your application: _____.

Since the Scholarship is for religious education ONLY, do you agree to repay all money received from ESTARL, in the event you withdraw from school? _____.

It is understood that the amount of each ESTARL Scholarship shall be determined by the ESTARL Committee of The Grand Chapter of North Carolina, Order of The Eastern Star, but in no case shall amount to more than \$1000.00.

It is understood that this application shall not be considered unless it is completed in full.

Must be in the hands of the ESTARL Committee by 1 March

I will use any grant that I might receive to the best of my ability and endeavor to carry out my plans as herein outlined.

Date	Signature
_____	_____

Recommendation of _____ Chapter # _____

Name : _____ Address: _____ of Chairman