

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 #: \_\_\_\_\_

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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 number: \_\_\_\_\_

Parents or Spouse's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

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 a member: \_\_\_\_\_

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

\_\_\_\_\_

List special church projects you 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 the type of work \_\_\_\_\_ and amount of remuneration.

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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?

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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 \$2,000.00.

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

APPROVED BY Clearing COMMITTEE

