Grand Chapter of North Carolina, Order of the Eastern Star
Grand Chapter Scholarship – 20___- 20___ Academic Year
Application Form – First Time Applicant
DUE MARCH 1ST

Please print or type all entries. Date: _____

Student's Name: _____ _____ _____
Last First Middle

Permanent Home Address: _____
_____

Telephone: Home: ______ Cell: _____ email:_____

High School Attended: _____ County: _____ Phone: _____

Family Information

Name Father/Stepfather/Guardian: _____
Do you live with him? ☐ Yes ☐ No His Occupation: _____
Employer: _____ Annual Income: _____

Name Mother/Stepmother/Guardian: _____
Do you live with her? ☐ Yes ☐ No Her Occupation: _____
Employer: _____ Annual Income: _____

Check all that apply: ☐ Father deceased ☐ Mother deceased
☐ Parents separated ☐ Parents divorced

List names and ages of all brothers or sisters presently attending college

Name	Age	College Attending

High School/ College, Community and Religious Activities
In the spaces below, list all extracurricular activities in which you participated
(use back if necessary):

_____ _____ _____
_____ _____ _____
_____ _____ _____
_____ _____ _____

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Student's Name: _____ _____ _____
Last First Middle

High School Record (complete only if currently a High School Senior)

Class Rank: _____ out of _____ GPA: _____ ☐ Weighted ☐ Actual

SAT Scores: Math _____ Verbal _____ Composition _____ Total _____

ACT Scores _____ _____ _____ _____ _____
English Math Reading Science Writing

Honors or Awards:

_____ _____ _____

_____ _____ _____

Higher Education (complete if currently enrolled in college)

College classification: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

School: _____

☐ University ☐ College ☐ Community College ☐ Technical School

Course of study: _____

Students graduating from *High School* must provide an Official High School Transcript.

If you are a 1st Time applicant and already enrolled in college, you must provide an Official Transcript of your college grades.

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Work Experience

List any work experience you have had during the past 4 years:

Employer	Position
_____	_____
_____	_____
_____	_____
_____	_____

Grants and Scholarships

Please list all Grants or Scholarships for which you have applied or received for the upcoming school year:

Name of Scholarship or Grant	Amount		
_____	_____	☐ Pending	☐ Granted
_____	_____	☐ Pending	☐ Granted
_____	_____	☐ Pending	☐ Granted
_____	_____	☐ Pending	☐ Granted
_____	_____	☐ Pending	☐ Granted

Financial Statement

Please include the most recent copy of your IRS form 1040 showing adjusted gross income if available. Also include that of your parents or guardian if they claim you as a dependent. No consideration will be given to applications without these forms.

I verify that the information provided on this form is accurate to the best of my knowledge.

_____ _____

Applicant Signature Date

Please submit all forms by **March 1**

All forms may be scanned and emailed as pdf files if desired.

APPROVED BY CLEARING COMMITTEE

Clear Print