



**Eastern Star Award for Religious Leadership (ESTARL)  
Scholarship Application**

**The Grand Chapter of Connecticut  
Order of the Eastern Star, Inc.  
P.O. Box 143  
Plymouth, CT 06782-0143**

Check Appropriate Box:  First-Time Freshman  Continuing Student  
School Year for Which You are Applying \_\_\_\_\_

For Committee Use Only	
Award Amount	\$ _____

Name \_\_\_\_\_  
Last First Middle  
 Permanent Home Address \_\_\_\_\_  
 \_\_\_\_\_  
Street / Route / Box #  
 \_\_\_\_\_  
City State Zip

- Eligibility Requirements*
- Enrolled in an accredited college or university
  - Enrolled in a program of training for religious leadership or religious music
  - Shows evidence of financial need
  - Return application and all requested information postmarked no later than February 1, 2018

e-mail: \_\_\_\_\_  
 Home phone number: \_\_\_\_\_  
 Birth date: \_\_\_\_\_  
 Single  Married  Head of Household

**All Applicants are to Complete this Section**

- How did you learn about the ESTARL Scholarship program? \_\_\_\_\_
- Was your family's adjusted gross income more than \$50,000 in the previous year?  Yes  No
- Could you pursue your degree without a scholarship?  Yes  No
- Are you, or any member of your family a member of the Order of the Eastern Star or the Masonic Fraternity?  Yes  No  
 If YES, please give their name(s), and the chapter or lodge name(s) & number(s). \_\_\_\_\_

**EDUCATIONAL HISTORY (All Applicants are to Complete this Section)**

- Highest Level of Education Attained**  
 GED  HS Diploma  Associate's Degree  Bachelor's Degree  Master's Degree  Doctorate

**Colleges / Universities Attended**

Institution	Location	Dates Attended	Degree's Attained

- Are you now Engaged in Religious Education Studies?  Yes  No
- When Will You Complete Your Present or Proposed Course of Study? \_\_\_\_\_  
 Degree to be Obtained: \_\_\_\_\_
- Do you Anticipate Further Study When You Complete Your Present Course Work?  Yes  No  
 If Yes, For What Degree? \_\_\_\_\_
- Check All Types of Religious Leadership for Which You are Preparing  
 Minister \_\_\_\_\_ Missionary \_\_\_\_\_  
 Director of Religious Education \_\_\_\_\_ Director of Youth Leadership \_\_\_\_\_  
 Church Music: Organist \_\_\_\_\_ Director: \_\_\_\_\_  
 Any other Activity in the Field of Religious Service (Please specify): \_\_\_\_\_



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### Financial Need

#### Anticipated Expenditures for the Next Year

Tuition	\$
Room and Board	\$
Fees	\$
Books and Supplies	\$
Subscriptions, Class and / or Other Dues	\$
Other Directly Related to Education (Please Specify) _____	\$

#### Awarded Scholarships (not including ESTARL)

	\$
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### ADDITIONAL INFORMATION OR UNUSUAL CIRCUMSTANCES

If there is any additional information that you feel would assist the committee in making their decision or any unusual family or personal circumstances that should be considered when evaluating this application, please describe these. You may continue your description on an additional page.

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### GOALS AND ASPIRATIONS

Write a brief statement or summary of your plans as they relate to your educational and religious leadership career objectives and long term goals. You may attach a typed statement to this application.

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### COMMUNITY ACTIVITIES, AWARDS AND HONORS

List all community activities in which you have participated without pay during the past 5 years. Note all special awards, honors and offices held.

Activity / Organization	What Did you Do / Special Awards / Honors / Offices Held	No. of Year(s) Participated



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COMMUNITY ACTIVITIES, AWARDS AND HONORS (continued)

Please State any Extra Activities in Which You are or Have Been Engaged and any Experience You Have Had in Practical Field Work or Training:

Three horizontal lines for writing community activities.

REFERENCES

Personal References

Table with 4 columns: Name, Address, Phone, Relationship

Religious Community Reference (Written Recommendation Required)

Table with 4 columns: Name, Address, Phone, Relationship

Academic Reference (Written Recommendation Required)

Table with 4 columns: Name, Address, Phone, Relationship

ACADEMIC TRANSCRIPTS

A copy of an official transcript of grades must be sent with this application. On-line grade reports and transcripts ARE acceptable.

- A. Students currently or previously enrolled in college must include all college transcripts of grades from each school attended.
B. High school seniors and students who have completed less than one full quarter or semester of post-secondary education must include a high school transcript of grades.

APPLICATION CHECKLIST

The applicant is responsible for submitting all materials to the ESTARL Committee Chairman on time. Incomplete applications will not be evaluated. This application for a scholarship becomes complete and valid only when the ESTARL Committee has received all of the following materials.

- Completed Scholarship Application
Copies of Required Transcripts
Written Recommendation from a Religious Community Member
Written Academic Recommendation
Postmark Deadline is March 1, 2019

All materials including transcripts must be addressed to: ESTARL Scholarship Committee c/o Cindy York 26 Trout Brook Circle Newington, CT 06111

I acknowledge that the decision of the ESTARL Scholarship Committee is final. I certify that I meet the basic eligibility requirements of the program as described and that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to provide further information to support what I have given on this form. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature and Date lines