

September 27, 2008

TO: Bethel Guardian Councils
Kansas Job's Daughters

FROM: Education Committee of the Grand Guardian Council of Kansas

SUBJECT: 2009 York Rite Scholarship Information

Attached are the application forms for the scholarship application for the Kansas York Rite Scholarships. Please present this information to your daughters at your next meeting. Encourage those members who will be attending an accredited post-secondary educational institution, have a grade point average of no less than a 3.0 or a "B" average, and could use this assistance, to apply for a scholarship. These forms may be duplicated if additional copies are needed.

There are several scholarships given yearly by the York Rite Bodies to assist youths in continuing their education beyond the secondary school level and this one application will be considered for all of the different scholarships. Please note there are several differences in the required attachments for these scholarships.

The completed Scholarship Grant Application Form, official school transcript of your most recently completed academic term and a list of your other activities must be postmarked **no later than June 30, 2009** and sent to:

Wayne H. Rollf, Grand Recorder
Knights Templar Educational Foundation
P O Box 1217
Topeka, KS 66601-1217

Please take care to follow these procedures, as **this may result in disqualifying an applicant if they are not followed.**

If you or the daughters have **any** questions concerning the scholarship grants or the application, please do not hesitate to call me or Wayne Rollf.

Jobie Love,

Michele Ann Fate, PGG
Chairman, Education Committee
12211 England Street
Overland Park, KS 66213
913-402-6855
kufate@kc.rr.com

THE KNIGHTS TEMPLAR EDUCATIONAL FOUNDATION

AWARD FOR SCHOLASTIC ACHIEVEMENT APPLICATION

This is a highly competitive grant and all completed applications will be considered. Please type application or print in ink. Do not use pencil. Incomplete applications will not be considered.

PERSONAL DATA

LAST NAME: _____ FIRST NAME: _____ MIDDLE INITIAL: _____

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

TELEPHONE: _____
(Area code) + number

ELIGIBILITY

To be eligible to receive a grant from the Knights Templar Educational Foundation, an Applicant must meet all the following criteria:

1. Be a United States Citizen
2. Be a Kansas Resident
3. Will be attending an Accredited Post-Secondary Educational Institution in the United States of America.
4. Have a Grade Point Average no less than 3.0 or a "B" Average (latest transcript attached)

MISSION STATEMENT

The Knights Templar Educational Foundation Committee shall consider all applications for grants without regard to age, race, religion, national origin, or gender. This award is open to all students regardless of their financial circumstances.

HIGH SCHOOL APPLICANTS

Current or Most Recent High School: _____

Address: _____ City: _____ ST: _____ Zip: _____

Grade Point Average: Provide your cumulative G.P.A. for you last completed academic year. This must be evidenced by a certified copy of your transcript being attached. Please circle the G.P.A. on the transcript.

G.P.A.: _____ on a scale of: _____

S.A.T. Scores: Math _____ Verbal _____ If not available, please explain _____

ACT Assessment Score: _____

Principal or Guidance Counselor furnishing a reference: Name: _____

Address: _____ City: _____ St: _____ Zip: _____

Phone: _____

Note: CERTIFIED COPY OF OFFICIAL TRANSCRIPT MUST ACCOMANY THIS APPLICATION

I AM PLANNING TO ATTEND

Name of Accredited Post-Secondary Educational Institution: _____

Address: _____ City: _____ St: _____ Zip: _____

Expected Student Status: (check one) Full Time _____ Part Time _____ Enrolled for next year _____

Class enrolled: Freshman _____ Sophomore _____ Junior _____ Senior _____

Major course of study: _____

Minor course of study: _____

Do you anticipate transferring or attending a different post-secondary educational institution other than the one listed before: Yes _____ No _____ If yes, list name of institution: _____

COLLEGE, GRADUATE or TRADE SCHOOL APPLICANTS

College, University or Trade School Name: _____

Address: _____ City: _____ St: _____ Zip: _____

Grade Point Average: Provide your cumulative G.P.A. for you last completed academic year. This must be evidenced by a certified copy of your transcript being attached. Please circle the G.P.A. on the transcript.

G.P.A.: _____

Major courses of study: _____

Minor courses of study: _____

Expected date of graduation: _____

Do you plan to attend graduate school: Yes _____ No _____ if yes, when: _____

Proposed graduate school name: _____

Course Study: _____ Estimated graduation Date: _____

Note: CERTIFIED COPY OF OFFICIAL TRANSCRIPT MUST ACCOMPANY THIS APPLICATION

ABOUT YOU

List all academic awards and honors received: _____

State your primary educational goal: _____

Should you receive a monetary award, how would you use this award to further your education: _____

(Use separate piece of paper if necessary)

Do you have a Masonic relationship?: _____
(use a separate sheet if more room is needed)

YOUR FINANCIAL NEEDS

(Do not leave any question blank. Provide a reasonable estimate if actual figures are not available.)

Annual Educational Expenses

Tuition & Fees: \$ _____ Transportation: \$ _____

Room & Board: \$ _____ Books & Supplies: \$ _____

Other expenses (please explain) _____

List financial aid (Scholarships or Grants, not loans) for which you have been approved and will receive this academic year

_____ \$ _____

How much will you contribute towards your total expenses? \$ _____

Savings & Investments \$ _____

Summer Employment \$ _____

Parents/Legal Guardian contribution \$ _____

Other Assistance:

Name: _____ Amount: \$ _____

Name: _____ Amount: \$ _____

Name: _____ Amount: \$ _____

YOUR OTHER ACTIVITIES

List memberships in non-academic clubs, civic activities, community, religious or political organizations. The organization, office held or rank attained, date and any award or honor received. (List on a separate piece of paper)

I certify that all information contained herein or attached is correct to the best of my knowledge.

Applicants Signature: _____ Date: _____

CERTIFICATION

Applicants may not be considered without the following, in its entirety: Pages 1 through 3 of this application, with complete information and necessary attachments. To include a certified copy of your official school transcript of your most recently completed academic term. **APPLICATIONS MUST BE IN TO THE GRAND YORK RITE OFFICE BY 5:00PM ON JUNE 30, 2008** to be eligible for consideration for the ~~2008~~ ²⁰⁰⁹ Fall Semester.

Mail completed application and all paperwork to:

Wayne H. Rolf
Grand Recorder
Knights Templar Educational Foundation
PO Box 1217
Topeka, KS 66601-1217

Checklist for Scholarship Application

1. Scholarship Grant Application
 - Application filled out completely (3 pages)
 - Applicant's signature
2. Transcript
 - Certified copy of High School Transcript (and/or post-secondary school, if applicable)
 - Must have your cumulative *GPS* for last completed academic year
 - Circle the *GPA* on the transcript
3. List of memberships in other clubs/activities with offices held, awards received, etc.
2. Mail to Wayne Rollf
 - Completed Scholarship Grant Application form
 - Transcript
 - List of memberships, etc.
 - Sent postmarked no later than **June 30, 2009**
 - to: Wayne H. Rollf
 - Grand Recorder
 - Knights Templar Educational Foundation
 - P O Box 1217
 - Topeka, KS 66601-1217