



2100 N. Broadway, Ste. 250, Santa Ana, CA 92706 / 714-547-7325 www.CASR-Foundation.org

Available Program:

Undergraduate Scholarship
Graduate

Application Deadline:

2/21/2020
2/21/2020

In Reply to Your Inquiry on Scholastic Aid

We enclose a Program Description giving the benefits, requirements, and deadline date. On the second page of the application, give the Chapter No. of any Masonic Youth Group or Family Masonic Affiliation. The third thru sixth pages of the application are to list your extracurricular activities. Instruct those who write your letters of recommendation to limit comments to **one page only**; this includes each activity leader. Please limit your list to no more than **four activities** which you feel would assist in the evaluation of your application. **Keep your file brief.**

We ask that you type your letter of introduction with signature handwritten. **Do not staple** your application packet together and **do not enclose your application in a folder or booklet** as all applications are to be compiled and distributed to the Scholarship Committee Members. Forward your application to us in the following sequence:

1. Original Application with wallet size photo
2. Original Letter of introduction (A letter explaining who you are and why you want a scholarship, etc., **One page only**)
3. Original Letters of Recommendation (from teachers, employers, activity leaders- community, school, religious Volunteer, etc., **Limit your letters to a maximum of Four**)
4. One Original, **certified** transcript (sealed or unsealed) including SAT Scores. If your transcript is sealed in an Envelope, forward the transcript to us in its sealed form.
5. Do **not staple** anything together, use a **paper clip**.
6. School – Any fully accredited college or university nationwide.
7. Study Plan – The major must be in a standard academic field. Class load is a 12 unit minimum. We require grades (**Not Pass or Fail ratings**). The GPA (grade point average) for our grant is 3.0 or better on a 4.0 basis. We seek students who are serious about their education
8. **Deadline Date** - Your application must be complete and in our office on or before 3:00 PM February 15, 2019. There are no exceptions.
9. **Selection** – The Scholarship Committee reviews all applications and selects the recipient(s) of the Scholarships. All applicants are notified of the outcome in writing.

Allow adequate time for your Application to be received by our office.

Your Application is due in our office on or before 3:00 PM, February 21, 2020

Incomplete or late applications will not be considered.

Sincerely,

Raymond D. Godeke

Executive Vice President and Secretary

Application for Financial Aid



I am applying for:

____ Undergraduate Scholarship

____ Graduate Level

In the Fall of 2020, I will be attending college as a:

Freshman Sophomore Junior Senior Graduate

Date: _____

Last Name	First Name	Birthdate	Birthplace	Citizenship
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Home Address	City	Country/State	Zip	Phone
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Current Address	City	Country/State	Zip	Phone
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E-Mail Address

College or University	You Will Attend	City	State	Major
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Number of Years of Aide Needed		Married?	Children?
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Number of Siblings	Masonic Membership (self & family)	Name, Relationship and Location
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Volunteer Activities (Other than those listed on pages three and four)

Current Employer/Phone

Employment History

Application for Financial Aid

Extracurricular Activities

(All activities listed below should have a letter of recommendation from the group/organization leader or person in charge)

4. _____
Name of Activity or Organization Name and title of leader or person in charge

_____ Street Address

_____ City State Zip

_____ Give a brief description of the Organization and your responsibilities within it.

Application for Financial Aid

Education History

Elementary School	Address	Public/Private
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Intermediate School	Address	Public/Private
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High School	Address	Public/Private
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College Level:

School Name	Address	Public/Private
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Graduate Level:

School Name	Address	Public/Private
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Degree/Date Conferred	Honors
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Financial History (confidential)

Father's Name, Address, Employer	\$ _____ Income	\$ _____ Value of Assets
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Mother's Name, Address, Employer	\$ _____ Income	\$ _____ Value of Assets
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Your total source of income (employment, parents, trust, Social Security, work/study wages on campus, campus loans, etc.)

\$ _____
Your Total Annual Income

Date applied to us for funds in the past?	Date received funds from us in the past?
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Name of any family member who received a grant from us?	Date grant received?
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