



2100 N. Broadway, Ste. 250, Santa Ana, CA 92706 / 714-547-7325 [www.CASR-Foundation.org](http://www.CASR-Foundation.org)

**Available Program:**

Undergraduate Scholarship  
Graduate

**Application Deadline:**

5/31/2021  
5/31/2021

**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. Forward your application to us in the following sequence:

1. Application
2. Letter of introduction (A letter explaining who you are and why you want a scholarship, etc., **One page only**)
3. Letters of Recommendation (from teachers, employers, activity leaders- community, school, religious Volunteer, etc., **Limit your letters to a maximum of Four** (Due to Covid restrictions you may not have had recent opportunities for in-person activities, as such you may submit letters from previous in-person activities prior to such restrictions.)
4. One Original, **certified** transcript including SAT Scores (if your college required them).
5. School – Any fully accredited college or university nationwide.
6. 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 unless mandated by a school's Covid policy**). The GPA (grade point average) for our grant is 3.0 or better on a 4.0 basis.
7. **Deadline Date** - Your application must be complete and in our office on or before 3:00 PM May 31, 2021. There are no exceptions.
8. **Selection** – The Scholarship Committee reviews all applications and selects the recipient(s) of the Scholarships. All applicants are notified of the outcome in writing. Incomplete or late applications will not be considered.

If mailing your application, please allow adequate time for your application to be received by our office. You can also submit your application via email to [mharrington@casrf.org](mailto:mharrington@casrf.org).

Sincerely,

Arthur L Salazar Jr  
Executive Vice President and Secretary

# Application for Scholarship

I am applying for:

\_\_\_\_ Undergraduate Scholarship

\_\_\_\_ Graduate Level

In the Fall of 2021, I will be attending college as a:

Freshman  Sophomore  Junior  Senior  Graduate

Date: \_\_\_\_\_

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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

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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)

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Current Employer/Phone

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Employment History

# Application for Scholarship

## Extracurricular Activities

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

1. \_\_\_\_\_  
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.

\_\_\_\_\_

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## Application for Scholarship

### Extracurricular Activities

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

2. \_\_\_\_\_  
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.

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## Application for Scholarship

### Extracurricular Activities

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

3. \_\_\_\_\_  
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.

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## Application for Scholarship

### 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.

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# Application for Scholarship

## Education History

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High School	Address	Public/Private
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College Level:

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School Name	Address	Public/Private
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Graduate Level:

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

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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

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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?

**Your other financial aid, if any**

\$ _____			
Amount	Grant	Grantor	Date Paid

  

\$ _____			Applying now:
Grant	Grantor	Date Paid	

List below Your Estimated Year's Costs (tuition, books, fees, room/board)

Viewpoints:

1. Do you believe in a Supreme Being?
  
  
  
  
2. What are your beliefs on separation of church and state?
  
  
  
  
3. Describe briefly your career goals.

I understand the Foundation may publicize my name and/or photo if I am awarded a scholarship.

\_\_\_\_\_ **Applicant's Signature**                                  \_\_\_\_\_ **Date**

**Statement by Parent or Guardian:**

I have read the foregoing application and approve the request for the Foundation's financial assistance for educational purposes.

\_\_\_\_\_ **Applicant's Parent or Guardian**                                  \_\_\_\_\_ **Date**