



## SCHOLARSHIP APPLICATION

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New Hampshire DeMolay • 30 Kaunas Circle • Manchester NH 03102 • [www.nhdemolay.net](http://www.nhdemolay.net)

PLEASE FILL OUT THIS FORM COMPLETELY AND RETURN TO THE EXECUTIVE OFFICER

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

### Eligibility:

Applicants must at the time of applying be members of the Order of DeMolay in New Hampshire in good standing, pursuing a degree or certificate in an accredited post-secondary institution.

**This scholarship is not based on financial need alone. Those demonstrating consistent scholarship and leadership in school, DeMolay, or in the community are given equal consideration, regardless of need.**

### Checklist of Requirements:

- A Completed Application Form (signed).
- A letter including statements regarding DeMolay involvement, extra-curricular activities, work and home life, and the applicant's goals and hopes for school or college and beyond.
- A brief summary of financial requirements should also be included. Additionally, the candidate may, but is not required to, outline the available financial resources that the candidate possesses in order to meet the need.
- A current school (high school or college) transcript.
- A signature of endorsement from an Advisor.
- Any additional information you deem pertinent to your application or that might detail extraordinary needs.

New Hampshire DeMolay  
Scholarship Committee  
30 Kaunas Circle  
Manchester NH 03102

**DUE DATE: APRIL 30 ANNUALLY**

**STUDENT INFORMATION**

Name of School/College: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Field of Study (*Include Degree or Certificate to be earned*):

\_\_\_\_\_

What will your educational level be during the coming year:

Freshman                       Sophomore                       Junior                       Senior  
 Other

**SECONDARY AND ANY POST-SECONDARY SCHOOLS ATTENDED** – (*A separate sheet of paper attached to this form is acceptable if more space is required.*)

⋮

Date	Name of School	City & State
_____	_____	_____
_____	_____	_____
_____	_____	_____

List all School & Community Activities not included on your transcript – (*A separate sheet of paper attached to this form is acceptable if more space is required.*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PERSONAL RECORD**

Mother's/Guardian's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's/Guardian's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

List total number of children dependent on parents/guardians: (Include self, brothers, and sisters starting with the oldest)

Name	Age	School Attending	Employed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**YOUR WORK EXPERIENCE** – Include part-time during school year and seasonal/summer employment– (A separate sheet of paper attached to this form is acceptable if more space is required.)

Employment _____	Year _____	Hrs/Wks _____
Employment _____	Year _____	Hrs/Wks _____
Employment _____	Year _____	Hrs/Wks _____

**DEMOLAY INFORMATION**

Name of your DeMolay Chapter: \_\_\_\_\_

Chapter and State Offices Held:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Honors and Awards:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe any unusual circumstances, financial and otherwise, that should be considered when reviewing your application (attach a separate sheet of paper if needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Be sure that you have completed the checklist on page one. You may also include other pertinent information (including details of your DeMolay involvement) to the Scholarship Committee. You may attach additional pages to this application should you need additional space to add anything relevant to this application. Scan and email to [eo@nhdemolay.net](mailto:eo@nhdemolay.net) or mail the completed application to:

NEW HAMPSHIRE DEMOLAY, 30 KAUNAS CIRCLE, MANCHESTER NH 03102

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

Advisors Signature \_\_\_\_\_

Any advisor Comments: \_\_\_\_\_

\_\_\_\_\_

The New Hampshire DeMolay Scholarship Program adheres to Title IX, § 86.37, in its selection of scholarship recipients in that it does not award scholarships on the basis of race, color, religion, or national origin. It does award scholarships equally on the basis of financial need and academic ability. It does require that the candidate be an Active Member of the Order of DeMolay in New Hampshire in good standing.