



APPLICATION FOR ESTARL AWARD
Eastern Star Training Awards for Religious Leadership
The Grand Chapter of Florida, Order of Eastern Star Inc.

The purpose of this award is to financially assist deserving young women and men who wish to devote their lives to God's service. Funds for this purpose will be available to qualified Florida residents. In the selection of applicants, those in their third year in an accredited college will take preference. Emphasis will be placed on need of financial assistance, academic record, character, leadership in Christian activities, and good citizenship.

Date of Application _____

Name of Applicant _____

Date of Birth _____ Social Security No. _____

FL Resident? _____ FL Home Address _____

Present Mailing Address when attending school: _____

Cell Phone # _____ e-mail address _____

Married? _____ Spouse's Name _____

Address of Spouse _____

Does your Spouse work? _____ Spouse Cell # _____

Annual Household Income _____

Parents' Address _____

_____ Phone # _____

Have you previously applied for this award? _____ If yes, give date of Application _____

Church Affiliation _____

Pastor's Name _____

Name of College/Seminary _____ Major _____

College Address _____

In the fall I will be classified as a _____ Junior _____ Senior _____ Masters

Degrees sought or earned _____

Graduation Date _____

Which area of religious leadership do you wish to receive training? _____

What other Scholarships will you be obtaining? _____

Estimate your total expense for the next year. Educational _____

Cost of living of living expenses _____

Do you plan to work while attending school? _____

Will it be necessary for you to incur debt to meet your necessary expense? _____

Educational History since High School

Name of School	Location	Dates Attended	Degrees Earned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List special church projects in which you have participated: _____

1. Do you agree that the money which you may receive from this Scholarship can be used ONLY for the purpose of securing training in the field of religious leadership as outlined in your Application. _____
2. Do you agree that this Scholarship is for religious education ONLY, repayment for the current semester grant may be required if enrollment in school is terminated. _____

**It is understood that this application shall not be considered unless it is completed in its entirety and accompanied by other documents as set forth in the requirements page.

**I will use any award that I might receive to the best of my ability and endeavor to carry out my plans as herein outlined above.

Signature of Applicant _____

*****MUST ALSO ATTACH A RECENT PHOTO HERE*****