

**GRAND CHAPTER OF IDAHO  
ORDER OF THE EASTERN STAR  
Scholarship Application**

Name of Applicant \_\_\_\_\_ Date of Application \_\_\_\_\_  
(Give full name) First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Student ID Number \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Your Address \_\_\_\_\_ Your Phone # \_\_\_\_\_  
at School \_\_\_\_\_ at School \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

College, University or Technical School Presently Attending: \_\_\_\_\_

Degree sought & Major \_\_\_\_\_ Class level: Junior [ ] Senior [ ] Graduate [ ]

Anticipated Date of Graduation \_\_\_\_\_

Office where check is to be sent  
and Address \_\_\_\_\_  
Office \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

List honors and/or recognition received while attending college/university:

List other Scholarships Received	Dates of Scholarships	Amount
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Statement of financial need: (attach additional sheets if needed)

Please furnish a copy of your most current transcript (an unofficial transcript is acceptable), two letters of reference, and a statement of your goals and ambitions.

Are you a member of the Order of the Eastern Star in Idaho? Yes [ ] No [ ]

Are your parents and/or grandparents members of the Order of the Eastern Star in Idaho? Yes [ ] No [ ]

Name of parent or grandparent	Name of OES Chapter	Location
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Signature of Applicant \_\_\_\_\_

Chapter  
Seal  
Affixed  
Here

Approved: \_\_\_\_\_  
Worthy Matron

Chapter Name & Number: \_\_\_\_\_

**Application deadline to the Chapter by April 1<sup>st</sup>**

**Deadline to the Scholarship Committee by April 15<sup>th</sup>**