MASONIC SCHOLARSHIP ASSISTANCE PROGRAM Media Release Authorization Form

This document, when signed by the recipient of a Masonic Scholarship Assistance Award and his or her parent or guardian, will authorize the Grand Lodge of Free and Accepted Masons in Nevada and/or its local constituent Lodge to report the award presentation including the name, background information and photo of the recipient, in public media such as newspaper, radio and television and in private Masonic publications.

Student:		
Signed this day of	76	, 20
Parent/Guardian:		
Signed thisday of		, 20
Submitted thisday of		
Signature: Worshipful Master,		

Attachment "D" Media Release Authorization Form - This form may be reproduced locally.



APPLICATION FOR SCHOLARSHIP ASSISTANCE FROM THE FRATERNITY OF FREE AND ACCEPTED MASONS <u>Jurisdiction of Nevada</u>

Γο: Guida			
From:	RENO	Lodge Numbe	er <u>13</u> , Free and Accepted Masons
Cor	ntact Person:_	CALEB JENSEN	
Add	dress: PO	BOX 405 RENO, N	V. 89504
Pho	one:(77	5) 324-1131 (ple	ease leave a message)
Subject: S	Scholarship Ass	sistance Application	
			ward tuition payable to a post High School inst
ution at the All name of the The graphical of You ful perspect of the 1. An off 2. Appro 3. Class 14. Grade 5. Person Sign	he College, Jr. administrative administrative le local Lodge of student computata, communiour assistance is estudent's applicial copy of the priate standard rank at the endernal comments sunature of School	College or Vocational and procedural controlficer is listed as "Corleted portion of the apty activities, reference gratefully solicited to the applicant. A sign	level. rols are at the local Masonic Lodge level. The ntact Person" above. pplication consists of three pages outlining bioss, academic history and objectives. provide supporting documentation and insight nature ready authorization form is provided as kind enough to furnish and attach c transcript on to date cation

ALL INFORMATION WILL REMAIN CONFIDENTIAL

Request for procedural assistance - This document may be reproduced locally. If School has Scholarship Applications they may be used in lieu of these documents.

APPLICATION FOR SCHOLARSHIP ASSISTANCE FROM THE FRATERNITY OF FREE AND ACCEPTED MASONS Jurisdiction of Nevada

Biographical Data

NAME OF APPLICANT:	<u> </u>			
RESIDENCE ADDRESS:				
CITY:				
MAILING ADDRESS:				
CITY:	STATE:		ZIP:	
RESIDENCE PHONE NUMBER:		WORK NUI	MBER:	
FAX:	EMAII	J		
NAME OF PARENT(S) OR GUARDI.	AN:	- N		
OCCUPATION OF PARENT(S) OR (
occornion of Talent (5) or (JOARDIAN			
ADDRESS OF PARENT(S) OR GUAI	— RDIAN:			
CITY:				
NAME OF HIGH SCHOOL:				
CURRENT GRADE IN SCHOOL:				
NAME OF YOUR HIGH SCHOOL GU				
COUNSELOR'S PHONE NUMBER:_	-			
TOP THREE CAREER PREFERENCE	ES: 1:			

Scholarship Assistance Application - This application may be reproduced locally.

	Community Activities and References
Sc	hool, Community, Civic and Volunteer activities:
•	Grade: 9
•	Grade 10:
•	Grade 11:
•	Grade 12:
En	aployment experiences:
•	Place of Employment:
•	Nature of Work:
•	Dates of Employment:
•	Approximate Hours Per Week:
Ch	aracter References: (List 3)
•	1. Name:
	Occupation:
	Address:
	Phone:
•	2. Name:
	Occupation:
	Address:
	Phone:
•	3. Name:
	Occupation:
	Address:
	Phone:

Academic History and Objectives					
In what academic areas are you most outstanding?					
Agriculture: Art: Athletics: Business: Chemistry Cyber-					
technology: Drama: English Language Skills: Foreign Language:					
Government: History: Industrial Arts: Keyboard Skills: Mathematics:					
Military Science: Music: Science: Social Services: Speech:					
Other curriculum related areas:					
List the top three post high school institutions of your preference: 1 2 3					
Student Applicant's Signature:					
Supporting Documentation* 1. Official copy of applicant's academic transcript. 2. Appropriate standardized test data. 3. Class ranking at end of 11th grade. 4. Grade point average for high school duration to date. 5. Guidance counselor's comments supportive of application. 6. Signed authorization for release of academic status materials. (Release form attached.)					
* UPON COMPLETION OF THIS THREE PAGE APPLICATION, PLEASE PROCESS IT THROUGH YOUR HIGH SCHOOL GUIDANCE OFFICE WHERE SUPPORTING DOCUMENTATION WILL BE AT- TACHED. Thank you, RENO Lodge Number 13, RENO Nevada, Free and Accepted Masons.					

AUTHORIZATION NEVADA MASONIC SCHOLARSHIP ASSISTANCE PROGRAM

To:		GALENA High School academic, counseling		chool academic, counseling and		
admi	nistrativ	e staff:			,	
cessi	t, and ac	ademic informa	ation appropria r scholarship a	te to b	to release and provide tran- be used exclusively in the pro- nce funded by the Nevada Ma-	
			APPLIC	ANT		
(Prin	t Name)		<u></u>			
		Date:				
		P.	ARENT OR O	SUAR	RDIAN	
(Prin	t Name)					_
Signa	ature:				Date:	_
ſ	Masonic I	Fraternity Coording	ator:			
]:	Name:	CALEB JENS	EN			
]	Phone: 775-324-1131 (please leave a message)					
	Lodge:	RENO	, No: _	13	_ Free and Accepted Masons.	
			FAITHOPE			