

MASONIC FOUNDATION OF UTAH, INC.
Salt Lake Masonic Temple
650 East South Temple Street
Salt Lake City, UT 84102-1141

Tracy D. Smith
Chairman
Lawrence K. Fielden
Secretary/Treasurer

Phone: 801-363-2936
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Dear Scholarship Applicant,

Enclosed is an application for the Masonic Foundation Scholarship for the upcoming academic school year. With the application, please submit two letters of recommendation, one of which should be from a member of a Masonic affiliated group.

Once awarded, scholarships are not automatically renewed. You must reapply annually and your application for continuation must include a written request for renewal and an official transcript to date from the University.

In order to be eligible for a scholarship, you must be a resident of Utah and currently enrolled as a full time student or have been accepted for admission as a full time student to an accredited college or university. Scholarships may be used only in the pursuit of a baccalaureate degree and may be applied towards tuition, fees or books. All awards will be sent to the school for distribution.

The scholarship does not provide assistance beyond the undergraduate level. The application must be in this office no later than June 30th to be considered for the upcoming academic year. If you have any questions, feel free to call the Grand Lodge office at 801-363-2936.

Sincerely,
Lawrence K. Fielden
Secretary/Treasurer

enclosure

MASONIC FOUNDATION OF UTAH, INC.

SCHOLARSHIP APPLICATION

Name: _____
(Last) (First) (Middle)

Social Security Number: _____ Date of Birth: _____

Address: _____
(Street) (City-State-Zip)

Telephone: _____

High School Graduated From: _____ Year: _____

A.P. Classes Successfully Completed: _____

College/University you plan to attend: _____

Classification: First Time Student _____ Continuing Student _____
Former Student _____ Last Year in School _____

Year you expect to graduate: _____

College/University: Major: _____

Minor: _____

Vocational Goal: _____

Post High School educational institutions you have attended: _____

***College/University must be a not for profit institution and accredited by one of the following regional accreditation agencies:**

Middle States Association of Schools and Colleges (MSA), Commission on Higher Education

New England Association of Schools and Colleges, Commission on Institutions of Higher Education (NEASC-CIHE)

North Central Association of Colleges and Schools, The Higher Learning Commission (NCA-HLC)

Northwest Commission on Colleges and Universities (NWCCU)

Southern Association of Colleges and Schools (SACS), Commission on Colleges

Western Association of Schools and Colleges, Accrediting Commission for Senior Colleges and Universities (WASC-ACSU)

Current scholarships and amounts of each: _____

Father/Guardian: _____

Address: _____
(street) (city-state-zip)

Masonic Affiliation: _____

Mother/Guardian: _____

Address: _____
(street) (city-state-zip)

Masonic Affiliation: _____

Current or former membership in Masonic affiliated organizations: _____

List any scholastic, community, and church activities, any honors won, and extracurricular activities:

Employer or previous work experience:

CERTIFICATION: I certify that to the best of my knowledge the information contained in this statement is correct and complete.

Applicant

Date

REMINDER: Include two letters of recommendation and an official transcript of grades.