

2025 SCHOLARSHIP APPLICATION

The Massachusetts DeMolay Association • 364 Greenwood St. Millbury, MA 01527 The DeMolay Foundation of Massachusetts • 186 Tremont Street, Boston, MA 02111 • 617-426-6040 x4231• www.mademolay.org

PLEASE FILL OUT THIS FORM COMPLETELY AND RETURN TO THE DEMOLAY OFFICE

Name:				
	(Last)	(First)		(Middle)
Address:				
City:		ST:	ZIP:	
Cell Phone Numbe	er:		E-Mail Address:	

Eligibility:

Applicants must be members of the Order of DeMolay in Massachusetts in good standing, pursuing an undergraduate education in an accredited institution of higher learning.

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

Checklist of Requirements:

A Completed Application Form (signed).

A letter of intent including statements regarding DeMolay involvement, extra-curricular activities, work and home life, and the applicant's goals and hopes for college.

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 copy of the FAFSA Form (Page 1) ensuring it displays the SAI number. (The Form does change from year to year. We would like the page that shows the SAI number.) Do not include tax forms for yourself or your parents. However, you are welcome to include any other pertinent supporting documents related to your FAFSA.

A letter of recommendation from your Chapter Advisor.

Any additional information you deem pertinent to your application or that might detail extraordinary needs.

Massachusetts DeMolay Scholarship Committee 186 Tremont Street Boston, MA 02111-1195

DUE DATE: APRIL 30, 2025

STUDENT INFORMATION

Are You a U.S. Citizen?	Y / N									
Are you a member of RC	TC or Massachusetts A	Army o	^r Air National Gu	ard? Y / N	I					
Name of School/College	:	Year of Graduation:								
Intended Field of Study:										
What will your education	al level be during the	coming	g year:							
Freshman	Sophomore		Junior	Se	enior					
SECONDARY SCHOOLS	SATTENDED:									
Date		Name of School		City & State						
List all School & Commu form is acceptable if more space i	•	ded or	n your transcript	– (A separate she	eet of paper attached to this					
PERSONAL RECORD										
Mother's/Guardian Name:			Occupation:							
Father's/Guardian Name:			Occupation:							
List total number of child starting with the oldest)	lren dependent on pa	rents/c	uardians: (Inclu	de self, broth	ners, and sisters					
Name	<u>م</u>	ge	School Atter	nding	Employed					

YOUR WORK EXPERIENCE - Include part-time during school year and seasonal/summer employment

Employment	Year	Hrs/Wks	
Employment	Year	Hrs/Wks	_
Employment	Year	Hrs/Wks	_

DEMOLAY INFORMATION

Name of your DeMolay Chapter: ____

(It is required, to have a letter of recommendation from your Dad Advisor or Advisory Council Chairman.)

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. Mail the completed application to: MASSACHUSETTS DEMOLAY SCHOLARSHIP, 186 TREMONT STREET, BOSTON, MA 02111-1095

Student Signature

Parent Signature

The Massachusetts DeMolay Association and The DeMolay Foundation of Massachusetts adheres to Chapter 622, MGL, CMR 8.11 and Title IX, § 86.37 on 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 Massachusetts in good standing.