



Squire Scholarship Application (Application deadline April 1)



Name: _____ Date of Application: _____

Address: _____

City: _____ State: _____ ZIP: _____

Date of Birth: _____ Phone: (_____) _____

E-Mail: _____

High School: _____ Graduation Date: _____

College / University (for continuing students): _____

Year / Level: _____

Verification of Eligibility:

I am a Squire in good standing of Circle _____ # _____.

I am a former Squire and the son of _____, a member in good standing of Council
_____ # _____.

NOTE: Submit the application, verification, personal statement, recommendations and all required information in one hardcopy packet. Incomplete forms, pages missing a required signature, undated applications, forms without names and other similar omissions may disqualify the application.

ATTESTED and AUTHORIZED:

Chief Squire: (Print Name) _____

Chief Squire: (Signature) _____ Date: _____

Bursar: (Print Name) _____

Bursar: (Signature) _____ Date: _____



Squire Scholarship Application Personal Statement



Name: _____

I plan to attend _____ in the fall.

I have not yet committed to a college or university, but I am considering the following:

As of this time, have you received notice of any other financial aid? Yes No

Please answer the following questions (each answer on a separate sheet of paper).

1. Describe your academic performance over the course of your high school career. Indicate any awards of distinction you have received for academics or leadership.

2. Describe your involvement in activities outside the classroom. Please include employment, family responsibilities, Church activities, and community and other service. List any elected positions held and the school year(s) involved.

3. Write a one-page essay on the theme "Why I Am Seeking This Scholarship". Please include sufficient detail for the Scholarship Committee to appreciate your application.

I hereby authorize the release of this Scholarship Application, references and my academic records to the Scholarship Committee. I certify that all information provided is true to the best of my knowledge.

Student's Signature: _____ Date: _____

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Application packet checklist (submit all documents in one **hardcopy packet** to the **State Scholarships Chairman**):

California State Council
PO Box 2649
West Covina, CA 91793
Attn: State Scholarship Chairman

- Completed application with all required signatures and dates.
- Answers to the three questions by the applicant (one page for each answer).
- Three written recommendations from non-relatives.
- Transcripts and /or other academic performance from schools.
- Submitted and **post-marked by April 1 deadline.**