



EXCELSIOR CONSISTORY, A.A.S.R.

315 White Horse Pike, W. Collingswood, NJ 08107-1997, (856) 854-1991
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THE WINSTON E. PARKER MEMORIAL SCHOLARSHIP

The Excelsior Scottish Rite Bodies Charity Fund is proud to present the Winston E. Parker Memorial Scholarship competition. The scholarship is for up to four years of undergraduate or graduate study in the fields of Forestry, Horticulture, or Medicine.

ELIGIBILITY

The annual competition for this scholarship is restricted to the son or daughter of any Master Mason, living or deceased, who resides within the eight counties in Southern New Jersey; Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Ocean and Salem.

Scholarships will be awarded to persons who have satisfactorily completed the requirements for high school graduation, who have been accepted in an accredited college or university.

The committee will consider the applicant's academic achievement, financial need, character, and service to others, in awarding scholarships. A transcript of the applicant's high school record or college record is required and must be included with the application. All questions on the application **MUST** be completed.

Students who receive the award must maintain a minimum 2.0 grade point average to continue the award. A yearly transcript of their college records will be ordered by the student and sent to this foundation at the student's expense.

AWARD

A scholarship award of \$6,000 for each year of successful advancement in an under-graduate or graduate college or university, not to exceed a total of four years, will be paid directly to the accredited institution of choice for the tuition charged by that institution.

Applications are available through the Excelsior Consistory Office. Deadline for Filing is April 1st.

APPLICATION FOR WINSTON E. PARKER MEMORIAL SCHOLARSHIP

Name: _____
(Please print full name)

Mailing Address: _____

Email: _____ Date of Birth: _____

Father's Name: _____ Living ___ Deceased ___

Father's Occupation: _____ Salary _____

Father's Membership in _____ Lodge No. _____ F&A.M.
(A photocopy of current Lodge membership card **MUST** accompany this application)

Mother's Name: _____ Living ___ Deceased ___

Mother's Occupation: _____ Salary _____

Number of other children in your family: _____ Their ages: _____

Number presently in College: _____

Name of your High School: _____

Location (Name of Town/City): _____

A transcript of your secondary school records, indicating your current GPA, Class Standing, SAT Scores and Year of Graduation MUST accompany this application.

List any offices you have held in school organizations: _____

List any Scholastic, Literary, or Scientific Honors or Awards: _____

List any Athletics you participated in: _____

List any other Organizations (including spiritual and/or non-profit) you have belonged to: _____

List any other Special Activities you have participated in: _____

Names of Colleges/Universities where you have been accepted: _____

Names of other Colleges/Universities to which you have applied: _____

What is your anticipated College Major? _____

(This scholarship is for four years of undergraduate or graduate study in the fields of Forestry, Horticulture, or Medicine.)

What were your Gross Earnings in the past year? _____

How did you earn this money? (indicate summer or part time jobs) _____

Indicate **by \$ amount or %** how you expect to fund your College Tuition (outside of this scholarship) from the following:

From Personal Savings _____

From Family Assistance _____

From Working While at College _____

From School/Federal/State Aid _____

Have you been awarded any other scholarships? _____ Describe: _____

Please list any additional information that you feel will be helpful. You may include a short personal biography: _____

Personal References (Please list name and complete address or phone number)

1. _____
2. _____

I hereby certify that I have read the purpose, eligibility requirements, and conditions of this scholarship award, and that I will abide by the decisions of the Scholarship Committee.

Signature

Date Signed

Deadline to return completed application is April 1st.

Please return completed application to:

Excelsior Scottish Rite Bodies Charity Fund
315 White Horse Pike
W. Collingswood, NJ 08107-1997

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