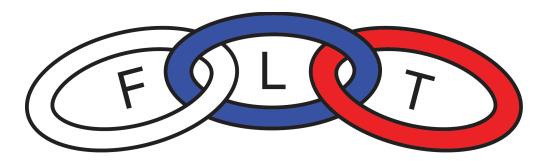


For our scholarship application guidelines, please follow the requirements - See 2025 Scholarship Criteria and Guidelines:

Applicant Information		
Full Name		
	R	Residence Address
Street Name		
City, State, Zip Code		
	•	Mailing Address
Street Name		
City, State, Zip Code		
	С	ontact Information
Primary Phone Number		
Email Address		
2. Education Information		
High School		
Address		
Year of Graduation		
3. For Current High School	Gradua	ates please fill out the following information:
List Academic Achievements		
Any extra-curricular activities:		
Hobbies:		



## 4. College/University/Trade/Vocational School:

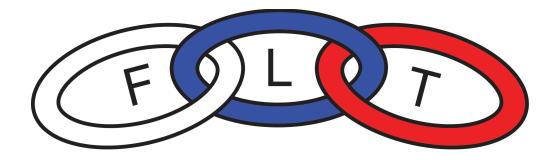
Name of Institutional Attending:	
Address (City, State)	
School Type (Trade, 4-Yr College, Other)	
Class Entering (Freshman, Sophomore, etc.)	
Major or Declared Field of Study	
Anticipated Graduation Date:	

### 5. Previous Scholarship:

Have you ever previously received a scholarship from Excelsior Lodge No. 1? No If Yes, please fill out below:					
Year	Amount				

# 6. Excelsior Sponsor

Name:	
Contact Number:	
Email Address:	
Relationship to the IOOF Member	



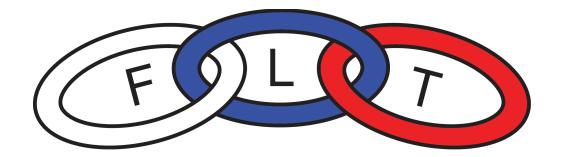
The Lodge Member has read and reviewed the 2025 Scholarship Criteria and Guidelines and is qualified to sponsor the applicant:

<mark>Name</mark>	Signature	Date
7. Parent of Applicant		
Parent or Guardian Information (	Only required if applicant is under 1	8 year of age)
<mark>Name</mark> of Parent or Guardian	Signature	Date

### 8. Applicant

### **Applicant Agreement and Consent:**

- I acknowledge that all the information provided as part of this application is true, accurate and complete to the best of my knowledge.
- I agree to abide by all scholarship guidelines and criteria.
- I agree and grant permission for use of my name and other information for the purpose of promotion, advertising, recognition, and/or news releases including publication, to Excelsior Lodge No. 1, I.O.O.F., without promise of favor or payment. Documents received will be used solely for the betterment of this scholarship program and for the acknowledgement of the recipient.



Applicant Name	Signature	Date
9. <u>Lodge S</u>	<u>ecretary</u>	
I, as Secretary, as of the current	certify that the above Lodge member is currently a meml t date below.	ber in good standing
Signature of Exc	celsior Lodge No. 1 Secretary	Date