

UNIVERSAL CRAFTSMEN'S COUNCIL OF ENGINEERS

SCHOLARSHIP APPLICATION APPLICANT'S FORM

The Masonic order of Universal Craftsmen's Council of Engineers desire to offer financial assistance to worthy students pursuing their formal education on the college level.

Applicants for a scholarship must be enrolled as a full-time student carrying twelve semester hours or more in a college or university of the student's choice that is fully accredited by a national association of colleges or a State educational department. Scholarship awards are for one year; however, recipients performing within the top 20% of their class scholastically, may reapply each year.

Applicants may pursue any academic field of study without restriction; however, preference and greater awards of value will be given to those pursuing a degree in a field of engineering. Presently, the scholarships will be five hundred dollars (\$500) for engineering majors and three hundred dollars (\$300) for non-engineering majors.

The procedure for applying for a scholarship:

1. Complete this application form and sign it at the bottom of this page and the bottom of the reverse side.
2. Secure a letter of recommendation from your high school principal or administrator or college counselor recommending you for an award and certifying that you are within the top 20% of your class academically.
3. Secure a copy of your high school transcript and/or college transcript.
4. Provide a current copy of your FAFSA form.
5. Have your parent or guardian complete the "parents" statement.
6. Forward this information to the Worthy Chief of the Universal Craftsmen's Council of Engineers that provided you with this application on or before April 1. Awards will be announced by mid-August each year.

Special Notes:

1. Your school or college may prefer to forward their recommendation and transcripts directly to the Worthy Chief.
2. Illegible applications will be returned without consideration.

PERSONAL DATA

Last Name: _____ First Name: _____ MI: _____ Circle: Mr. Mrs. Ms.

Home Address: _____ City: _____ St. __ Zip: _____

Home Phone: () _____ SS#: _____

Name of Father: _____ Name of Mother: _____

Name of Legal Guardian if different from above: _____

Address of Guardian: _____ City: _____ St.: __ Zip: _____

Are there any extenuating circumstances that warrant attention at this time that would increase your financial need through scholarships? Medication, family illness, handicaps, bankruptcy)

Please attach a sheet providing a brief narrative covering your interests, accomplishments and why you have chosen your career field. (Please sign and attach your response to this application)

Applicant Name: _____

Date: _____

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ACADEMIC PREPARATION

HIGH SCHOOL

High School attending/attended: _____

Date of Graduation: _____

Address of High School: _____ City: _____ St. _____ Zip _____

ACT Score: _____ SAT Score: _____ Class Rank ___ out of _____ GPA _____ out of _____

Academic Honors: _____

Extracurricular high school related interests and activities: _____

Church or community activities: _____

COLLEGE

College in which you will be enrolled in September: _____

Please indicate which of the follow applies to your enrollment:

_____ I have been accepted at this college

_____ I am waiting for acceptance at this college

_____ I have not yet applied for enrollment

_____ I plan to apply for acceptance by (date) _____

College address: _____ City: _____ St. _____ Zip _____

College phone number: () _____

Major field of Study: _____

Is this major a () Certificate () Associate Program () Baccalaureate Program

Other: Please describe: _____

Minor field of Study: _____

Academic Status as of September 2007: () Freshman () Sophomore () Junior () Senior

When do you expect to graduate? _____

College Academic Honors: _____

Other College Activities or Honors: _____

Last Semester GPA on College Level: _____ Overall GPA on College Level: _____

If you have additional information you wish to share with the scholarship committee you may include them below or attach an additional sheet:

I understand that if I receive an award, payment of the award will be made directly to me after I have entered college and notified the Chairman of the Scholarship Committee of my college address.

SIGNED BY APPLICANT: _____ DATE: _____

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PARENT OR GUARDIAN STATEMENT

To the Chairman of the scholarship committee U.C.C. of E.:

I am providing the following confidential information for your use in considering the application of the student named below for financial educational assistance:

NAME OF APPLICANT: _____

ADDRESS OF APPLICANT: _____

CITY: _____ ST: ___ ZIP: _____

Relationship of applicant to me: _____

Parent or Guardian name: _____

Parent/Guardian address if different from applicants: _____

City: _____ St _____ Zip _____ Phone () _____

Father/Guardian Employment Position: _____ Company: _____

Mother Employment Position: _____ Company: _____

Total family annual income: _____

No. Minor Dependents in family: ___ Number of dependents enrolled in college: ___

Please provide the U.C.C. of E. membership information supporting this application:

Relationship of applicant: Please circle: Father Grandfather Guardian

Name if different from above information: _____

I have been a member of the U.C.C. of E. since: (date) _____

U.C.C. of E. Council Name: _____ Council # _____

Additional comments you may wish to share with the scholarship committee:

This form is to be included with the applicant's application packet and returned to the UCCofE Council by April 1.

Signature of Parent or Guardian: _____ Date: _____

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SCHOLARSHIP APPLICATION HIGH SCHOOL ADMINISTRATOR OR COLLEGE COUNSELOR

Applicant's Name: _____

The above applicant has applied for a scholarship from the Universal Craftsmen's Council of Engineers. We would appreciate your comments and certifying the applicant ranks within the top 20% of his/her graduating class and that you feel the applicant is worthy of our support.

Our main focus is in students aspiring to prepare to enter one of the varied engineering fields; however, we also support students pursuing other academic fields.

Please respond to the following questions:

1. Do you consider the applicant honorable and worthy of aid? _____
2. Please circle your response to this question—Has the applicant maintained a fair—good—excellent record while attending school? This would include attendance, conduct, academic and support of school and community.
3. Please confirm that the applicant will rank within the top 20% of his/her graduating class or did rank within the top 20% when graduated. _____

Additional comments are welcomed below or on attached sheet.

Signature: _____ Position: _____ Date: _____
School/College: _____

Please forward this endorsement of a scholarship application on or before April 1 to:

Address: _____ City: _____ St. _____ Zip: _____