

Scholarship Application form for  
*Albert D. Miner, Mable Temple Newton and Educational Scholarships*  
Grand Chapter of New Hampshire-Order of the Eastern Star

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Other \_\_\_\_\_ Are any person(s) dependent on you for support? \_\_\_\_\_ If so, explain:

\_\_\_\_\_

How many children in your family: \_\_\_\_\_ Ages: \_\_\_\_\_

How many siblings in your family are attending college?

Additional information you wish to be considered?

\_\_\_\_\_

Name of College/Technical School Attending: \_\_\_\_\_

Address of Institution Attending: \_\_\_\_\_

If you are not currently attending, have you been accepted? *(Circle One)* Yes No

Major(s)/Minor(s): \_\_\_\_\_

How long is this program? *(Circle One)* 1 Year 2 Years 3 Years 4 Years Longer: \_\_\_\_\_

What year will you be in the fall? *(Circle One)* Freshman Sophomore  
Junior Senior Other: \_\_\_\_\_

Tuition: \$ \_\_\_\_\_ Books: \$ \_\_\_\_\_ Room & Board: \$ \_\_\_\_\_ Other

Supplies: \$ \_\_\_\_\_ TOTAL: \$ \_\_\_\_\_

Present Sources of income for school: Job: \$ \_\_\_\_\_ Loan: \$ \_\_\_\_\_ Scholarship: \$

\_\_\_\_\_ Grants: \$ \_\_\_\_\_ Other Revenues: \$ \_\_\_\_\_ Total: \$ \_\_\_\_\_ Have you

completed your FAFSA? *(Circle One)* Yes No

Please list your closest relative who is a member of Eastern Star, including yourself if applicable:

Name	Relationship	Chapter
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_____	_____	_____
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Are you a member of Rainbow or DeMolay? \_\_\_\_\_ If so, what Assembly/Chapter? \_\_\_\_\_

Please include the following with this application:

- Latest transcript of grades
- Copy of entire most current completed FAFSA form
- Copy of current dues card of Eastern Star member you are related to or a copy of your current IORG dues card or DeMolay member Card
- Two current letters of recommendation
- An essay that addresses why financial assistance is necessary, your future career goals, notable volunteerism and achievements, your involvement in extracurricular activities, and what a scholarship would mean to you.

Please send a completed application package with the above documentation to:

Robert Roakes, Chairperson  
54 Blake Hill Road, Center Ossipee, NH 03814-6924  
603-539-8276 Bobby.roakes@gmail.com

This application package must be postmarked **no later than June 1st, 2024** to be considered for the Educational, Mable Temple Newton, or Albert D. Miner Memorial Scholarships.

I certify that the information given herein, which you are authorized to verify, is true and correct, and I agree to notify the Scholarship Committee of any change in the information given above. This application shall remain the property of the Committee whether approved, not approved or withdrawn.

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Signature of Applicant

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Date