



Wisconsin DeMolay Foundation Scholarship Application 2024-2025 School Year

Before completing your Application, please read the following requirements:

1. You must be a member of (or have demonstrated significant support for) the Order of DeMolay in Wisconsin.
2. You must be a current student (or accepted as a student) for the 2024-2025 school-year.
3. All information submitted must be complete and accurate and submitted on or before the application deadline.
4. Personal reference contacts should reside or be employed in your home community and have known you for at least two years.
5. Scholarship grants are made for one year only. If a scholarship is sought for another year, a new application must be submitted for that year.
6. Use of this form is required. If the space provided for an answer is insufficient, you may continue completing the form by adding information or you may attach an additional page.
7. You must complete the form on a computer and email it in Word or PDF format to the Foundation Scholarship Committee Chairman, Scott E. Kaczor, no later than June 30, 2024 to sekaczor@aol.com.
8. Wisconsin DeMolay Foundation grants are made payable to the approved applicant and the identified college, university or other institution for tuition and books only. No portion may be used for room, board or general living expenses.
9. Any unused check for a grant must be promptly returned to the Wisconsin DeMolay Foundation. The check may not be used for a different academic year than that granted.
10. The Wisconsin DeMolay Foundation intends to notify applicants, electronically, by July 31, 2024, acknowledging the receipt of the Scholarship and, if granted, additional details.

Applicant's Name: _____
 First Middle Last DOB

Email (for the Foundation to contact you): _____

Home (this address will be used for grant distribution):

Street Address: _____

City, State and Zip Code: _____

Cell Phone: _____ Home Phone: _____

Address at School (if known):

Street

City, State & Zip

Name of DeMolay chapter(s) associated with: _____

List DeMolay activities and leadership roles: _____

If not a member of Wisconsin DeMolay, what has been your direct involvement and how have you demonstrated significant support for DeMolay in Wisconsin?

List past and present school, religious, civic and community activities and leadership roles:

How has your involvement in (or demonstrated support of) DeMolay impacted on your goals, ambitions and future plans?

Present Status:

High School: Senior ____ Graduate ____

College: Freshman ____ Sophomore ____ Junior ____ Senior ____

Graduate School ____

Other: _____

High School Name and City _____

College/Graduate School/Other _____

Course of Study _____

1. What institution will you attend during the next academic year? _____

2. Area of study or vocational concentration: _____

3. Exact grade-point average calculated on a 4.0 scale: High School _____ College _____

Name of father (or guardian): _____

His address: _____

His occupation: _____

Name of mother (or guardian): _____

Her address: _____

Her occupation: _____

List names, addresses, email and telephone numbers of two personal reference contacts (coaches, teachers, youth group leaders (other than DeMolay), etc. not related to you, who have observed your activities in the past two years.

<u>Name</u>	<u>Address</u>	<u>E-Mail Address</u>	<u>Telephone</u>
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1. _____

In what role or capacity did they know you personally. _____

2. _____

In what role or capacity did they know you personally. _____

List names, addresses, email and telephone numbers of two adult DeMolay references (not related to you) who have observed your activities.

<u>Name</u>	<u>Address</u>	<u>E-Mail Address</u>	<u>Telephone</u>
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1. _____

2. _____

Please set forth any additional information (personal or financial) that you believe will be of value to members of the scholarship committee.

If a minor is this application made with the knowledge and approval of your parent(s) or guardian(s)?

I confirm that all information included in this application is true, accurate and complete.

Type your name which will act as your signature

Date

Questions: Any questions you may have can be addressed to the Wisconsin DeMolay Foundation. Email your questions to: Dad Scott Kaczor - Scholarship Committee Chairman, sekaczor@aol.com

Common Questions

What if I change schools? Unused checks must be returned to the Foundation to be reissued to the new school and recipient. Notify the Foundation a.s.a.p. so they are aware of your situation.

Can I use the award for my second semester only? Yes, but the grant must be used in the current academic year. Also all checks should be cashed within 90 days to avoid any check expiration difficulties.

Mailing Address? WDF Scholarship Committee, c/o Dad Scott Kaczor, 4460 S. 50th Street, Greenfield, WI 53220 (not to be used for scholarship applications – please email applications to sekaczor@aol.com)

If this is the first time you are applying for a Wisconsin DeMolay Foundation Scholarship,

1. Please furnish the name, email and address (home or school) of the living teacher (elementary, middle or high school) who had the biggest positive influence on you:

2. Furnish the name, email and address (home or office) of the teacher's principal:

3. Furnish the name, email and address (home or office) of the teacher's superintendent of schools:

4. Furnish a sentence or two telling us how that teacher had a positive influence on you.

If the Foundation grants you a scholarship, we may write the teacher, advising that you are getting a scholarship from the Wisconsin DeMolay Foundation and how the teacher had a positive influence on you. We may also send a copy of that letter to the teacher's principal and the superintendent of schools.