

# SALISBURY SCOTTISH RITE CHARITABLE FOUNDATION, INC.

OF THE

ANCIENT AND ACCEPTED SCOTTISH RITE OF FREEMASONRY

SOUTHERN JURISDICTION OF THE UNITED STATES OF AMERICA

VALLEY OF SALISBURY . . . ORIENT OF MARYLAND

SAMUEL M. WALKER, 33°  
SECRETARY  
5739 MT. HERMON CHURCH ROAD  
SALISBURY, MARYLAND 21804



410-742-6548  
ishmore@verizon.net

March 1, 2016

To: Guidance Counselors  
From: Samuel M. Walker, Scholarship Committee Chairperson

Enclosed are applications for the Salisbury Scottish Rite Charitable Foundation Scholarship Program. We are asking that you make the application available to students meeting the criteria. When handing out the application, please note **B.1, B.2, B.3 and B.5** of the criteria on the back of the application. Because of the focus of the Scottish Rite, it is important that the student is aware of the **CAREER RESTRICTIONS (B.2)**

All necessary information for applying is indicated on the front page of the application. Please note the deadline for submission of the application. Everything that is required for the application packet should be **complete, legible and submitted together. INCOMPLETE PACKETS OR ILLEGIBLE APPLICATIONS WILL NOT BE CONSIDERED.** **SUBMISSION DEADLINE IS APRIL 8, 2016**

Please note that only **5 (five)** applications are being accepted from each school. You can collect them from your school and submit them together or encourage students to submit individually. The first five applications, meeting the criteria and received before the deadline, from each school will be the ones accepted.

We will be awarding **two** scholarships for **\$1000** each. Each scholarship is renewable for three additional years with proof of continued enrollment and satisfactory academic achievement. Students may change institutions only once during the four year scholarship period.

Please destroy any previous copies of the Scottish Rite application before handing these out this year. **ONLY APPLICATIONS WITH THE NUMBER 22205 IN THE BOTTOM RIGHT HAND CORNER WILL BE CONSIDERED.** If you have any questions, you can contact me during the day at 410-742-6548.

Thank you for your help and support of the Scottish Rite Scholarship Program.



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The Salisbury Scottish Rite Charitable Foundation plans to award two 4-year scholarships of \$500 per semester according to the following criteria:

- A. Any worthy high school student graduating from the Eastern Shore Counties of Maryland, Sussex County, DE or Accomack County, VA may apply for the scholarship/
- B. Each candidate **MUST**:
  1. **INCLUDE AN ACCEPTANCE LETTER** to an accredited institution in an Associate Degree or Baccalaureate Degree Program.
  2. Indicate a major in a career area which is **DIRECTLY RELATED** to helping children such as speech therapy or teaching.
  3. Plan to attend on a full-time basis.
  4. Submit a **COMPLETE AND LEGIBLE** application with all other written requirements.
  5. Provide **NOT MORE THAN FOUR (4)** letters of recommendation.
- C. Applications **MUST BE POSTMARKED BY APRIL 8** with decisions being made by May 31.
- D. The scholarship is renewable each semester upon written evidence to the Chairperson, by the student, that he/she is achieving at least a 2.50 GPA on a 4.00 scale.

Please return the completed application to:

Samuel M. Walker, Chairperson  
5739 Mt Hermon Church Road  
Salisbury, MD 21804

**NO APPLICATIONS POSTMARKED AFTER APRIL 8 WILL BE ACCEPTED**

**APPLICATION FOR UNRESTRICTED SCHOLARSHIP  
OFFERED BY  
THE SALISBURY SCOTTISH RITE CHARITABLE FOUNDATION, INC.  
For Graduating High School Students ONLY**

NAME \_\_\_\_\_  
Last First Middle

HOME ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ SOC. SEC. # \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ OCCUPATION \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ OCCUPATION \_\_\_\_\_

BROTHERS AND NAME \_\_\_\_\_ AGE \_\_\_\_\_ GRADE IN SCHOOL \_\_\_\_\_  
SISTERS AT HOME:

NAME \_\_\_\_\_ AGE \_\_\_\_\_ GRADE IN SCHOOL \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ GRADE IN SCHOOL \_\_\_\_\_  
COLLEGE, UNIVERSITY OR INSTITUTION YOU PLAN TO ATTEND:

MAJOR FIELD \_\_\_\_\_

HIGH SCHOOL ATTENDED \_\_\_\_\_ DATES ATTENDED \_\_\_\_\_

\*\*\*\*\*ATTACH OTHER SHEETS IF ADDITIONAL SPACE IS NEEDED FOR ANSWERS\*\*\*\*\*

HIGH SCHOOL ACTIVITIES AND HONORS \_\_\_\_\_

SCHOLARSHIPS ALREADY RECEIVED \_\_\_\_\_

COMMUNITY VOLUNTEER ACTIVITIES AND INTERESTS \_\_\_\_\_

WHY YOU NEED THIS SCHOLARSHIP \_\_\_\_\_

\*\*\*\*\*MUST BE INCLUDED WITH THE LEGIBLY COMPLETED APPLICATION:

- \_\_\_\_ 1. COMPLETE TRANSCRIPT OF ALL HIGH SCHOOL COURSES TAKEN WITH GRADES, GPA AND CLASS STANDING.
- \_\_\_\_ 2. UP TO FOUR LETTERS OF REFERENCE WHICH INCLUDE STATEMENTS OF INDUSTRY, CHARACTER, PERSONALITY AND ABILITY FOR ACADEMIC SUCCESS.
- \_\_\_\_ 3. A WRITTEN EXPLANATION, IN YOUR OWN HANDWRITING, OF WHY YOU FEEL YOUR CHOICE OF A CAREER WILL BE PRODUCTIVE AND BENEFICIAL AS RELATED TO CHILDREN .