



FROM THE **PUTER** OF:

Dad Lyester D. Billymer
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Greetings and Salutations Brother's:

It is indeed a pleasure to be able to send along with this note a copy of the DeMolay Foundation of Michigan, Inc. [2009 Scholarship Application Form](#).

A few things for you to remember while completing this application, it is always and extremely **IMPORTANT** that you fill out the application in full and provide **ALL** the requested information, i.e.: **TRANSCRIPT**. It also never hurts to listen closely to question number 35; we are always interested in the things that you have acquired on your "I LOVE ME WALL". Please note that there are required signatures, **all applicants MUST** have the Chapter Dad or Chairman sign the application, even if you are a Senior DeMolay. The Parent's signature will be required for all applicants under the age of 21.

Please remember, that this is a "Grant", you are not required to repay this Foundation for any amounts that may be awarded, **HOWEVER**, if for any reason you do not attend college, it will be expected that you return the awarded amount.

Also, you will be pleased to know that the attachment is a Word Document File format, which allows you to type in the information directly on the form, save it, and email it back to me. How much easier can I make it for you.....

I look forward to having your application returned **NLT June 1st 2009** and if you are awarded a Scholarship, I will notify you in time for you to make your plans to attend the Conclave 2009 Banquet, which is the customary location of the presentation.

If I can be of any assistance during the application process, please do not hesitate to contact me.

Sincerely,

Dad "B"

2009 MICHIGAN DeMOLAY SCHOLARSHIP APPLICATION



DeMolay Foundation of Michigan, Inc.

P.O. Box 2611

Farmington Hills, MI 48333-2611

(Please use the address at the end of this form to return your application)

Application for Educational Scholarship

(If more space is needed, use additional pages)

ALL INFORMATION WILL BE TREATED AS CONFIDENTIAL

1. Date:
2. Date of Birth:
3. Full Name of Applicant:
4. Home Address:
5. Member of Chapter, Order of DeMolay.
6. Are You Currently Employed (& where)?
7. Full or Part-Time?
8. Your Annual Gross Income:
9. Name of Parents (or guardians):
10. Address of Parents (or guardians):
11. Occupation of Father:
12. Annual Gross Income:
13. Occupation of Mother:
14. Annual Gross Income:
15. Other Children in Family (give names & ages):
16. Church Affiliation:
17. Member: (yes or no)
18. Give Masonic and/or Eastern Star Affiliation, if any, of Parents or Guardians:
19. Educational Facility You Have Chosen to Attend:
20. Address of Aforementioned:
21. Educational Field Chosen and why:
22. Estimated Annual Tuition:
23. Please Break Down This Tuition In The Following Categories:
 - 23a. Course Fees:
 - 23b. Book Fees:
 - 23c. Room & Board:
24. How Many Credit Hours do You Plan on Taking Per Semester?
25. Does a Transcript Accompany This Application?
26. Knowing That This Scholarship Does Not Cover 100% of Your Tuition, What Are You Doing, or What Have You Done, To Make Up The Difference:
27. Have You Been Awarded Any Other Scholarships to Date for Your Next Semester?
28. If Yes, Please Describe Them, (state the amount awarded, & dates received):

29. When Do You Expect to Complete Your Current Educational Goals?

30. On Completion of Your Current Educational Goals, Do You Expect to Continue Your Education?
(If yes, please describe):

31. Do You Have any Dependents? (If yes, please give names and ages)

32. You May Include Any Recommendations/Materials and/or Comments That May Help the
Scholarship Committee in Review of This Application:

DeMOLAY HISTORY

33. Received Initiatory Degree

34. Received DeMolay Degree:

35. Are you an: (If yes, answer the following giving dates awarded)

35a. R. D.:

35b. Chevalier:

35c. L.C.C.:

35d. (lessons completed):

35e.P.M.C.-M.S.A.:

36. List Merit Bars Earned:

37. List Offices You Have Held in Your Chapter/State:

38. Have You Been Determined to be an "Outstanding": (Give dates)

DeMolay Sportsman Ritualist

Chapter

State

I attest that this applicant is an Active or Senior DeMolay in good standing of our Chapter, and will not have obtained the age of 25 years prior to the State Conclave Banquet of the year this application is submitted.

Signature of Chapter Dad or Chairman of Advisory Council

Printed name, and date signed

If I am awarded a scholarship, and do not attend a certified or accredited school within six months of the receipt of the same, I/we understand that repayment of this scholarship is expected. I/we also certify that the statements made in this application are correct to the best of my/our knowledge.

Signature of Applicant

Signature of Parent or Guardian

Printed name of applicant and date signed

Printed name and date signed

DO NOT WRITE BELOW THIS POINT

For Foundation/Scholarship Committee Use Only

Date Received: _____

Date Reviewed by Committee: _____

Comments: _____

Date Presented to Board of Directors: _____

Comments: _____

Date approved/disapproved: _____

Amount approved: _____

Date award presented: _____

Please mail or e-mail this application to:

deputyldb@comcast.net

Dad Lyester D. Billhymer
DeMolay Foundation of Michigan, Inc.
Scholarship Committee Chairman
18144 Whitmore Drive
Clinton Township, MI. 48035