

ESTHER NORTHRUP MEMORIAL SCHOLARSHIP  
PRESENTED BY BEULAH CHAPTER, ORDER OF THE EASTERN STAR

APPLICATION INSTRUCTIONS

**NOTE: THIS SCHOLARSHIP IS FOR THE SCHOOL YEAR 2020-2021  
(FALL TERM 2020 THROUGH SUMMER TERM 2021).**

**ALL REQUIREMENTS MUST BE MET TO BE ELIGIBLE FOR A SCHOLARSHIP.**

**PLEASE FOLLOW ALL INSTRUCTIONS CAREFULLY**

**PRELIMINARY:** Please provide a phone number, following your name where you can be reached in case the Chairman needs to contact you. The address should be a location where information can be sent to you. This may be different from your home address. Please provide an e-mail address if you have one.

**ELIGIBILITY REQUIREMENTS:** Student eligibility requirements for this Scholarship shall be:

- 1.) A minimum of a 2.5 Grade Point Average (GPA)
- 2.) A permanent resident of the state of Washington and a senior attending Pasco School District.
- 3.) Requests for special eligibility may be submitted to the Scholarship Chairperson for consideration by the committee on a case by case basis.

**EDUCATION:** All applicants are required to complete all questions regarding their high school education, including General Education Diploma (GED) & home schooled.

**TRANSCRIPTS: (Current Education Level)**

- A. **HIGH SCHOOL:** Applicants must provide their **high school transcript**.
- B. **GED (General Education Diploma):** Applicants must provide a copy of their **GED and transcripts**.
- C. **HOME SCHOOLED:** Applicants must provide a copy of their **transcripts**.

**FINANCIAL PLAN:** Each applicant is required to provide a financial plan for the upcoming school year. **Each item of the Budget Forecast must be completed.** Be sure to include applications for scholarships as financial resource amounts. Do your best to honestly make this plan **balance**.

**ACTIVITIES:** List all activities, use additional pages if necessary and attach to your application.

**PERSONAL REFERENCES:** Provide two (2) letters of recommendation from adults in your community from different areas of interest. **(Letters from relatives are not acceptable).**

**ESSAY:** Attach an essay addressing **“Why I want to continue my education”** (150-300 words, typed and double spaced)

**SCHOOL INFORMATION:** Include your student ID number and the school address for transmittal of the scholarship check. Notify the Scholarship Chairman before August 1, 2020 if your educational plans change.

**BE SURE TO SIGN YOUR APPLICATION** Applications must be submitted on the 2020 form for the 2020-2021 school year.

**ALL APPLICATIONS MUST INCLUDE: TRANSCRIPTS, AFFIDAVITS, ACTIVITIES, PERSONAL REFERENCES, ESSAY AND SCHOOL INFORMATION SHOULD BE TURNED INTO SCHOOL ADVISOR OR SEND IN ONE PACKAGE TO THE ADDRESS BELOW. IT MUST BE POSTMARKED NO LATER THAN MAY 1, 2020.**

SUE BOOTHE  
2109 ROAD 44, PASCO, WA 99201

**SCHOLARSHIP APPLICATION**  
**For 2020-2021 School Year**  
**(Fall term 2020 through Summer term 2021)**

**To: SCHOLARSHIP COMMITTEE**

**Full Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
Please print or type (Last) (First) (MI)

**Address** \_\_\_\_\_  
(Number & Street) (City & State) (Zip Code)

**(e-mail address)** \_\_\_\_\_

**Name of Parents or Legal Guardian** \_\_\_\_\_  
(not required if 18 years or older)

**HomeAddress** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Educational Plans:**

**I am applying for a Scholarship to attend:** \_\_\_\_\_  
(Name of School that I will be attending) (Final submission of School name must be by August 1, 2020)

**Address** \_\_\_\_\_  
(Full address of School is required)

**To Become:** \_\_\_\_\_  
(Career, major field of study or trade)

**Have you applied for admission?** Yes \_\_\_ No \_\_\_ **Have you been accepted?** Yes \_\_\_ No \_\_\_

**If No, explain briefly** \_\_\_\_\_

**When will you begin?** \_\_\_\_\_

**Education:**

**High School:** \_\_\_\_\_ **Year Graduating/Graduated** \_\_\_\_\_

**Address:** \_\_\_\_\_ **GPA** \_\_\_\_\_ **Based on** \_\_\_\_\_ **Scale**

( applicants must include High School transcripts with application)

**Home School Applicants: Year Diploma Received** \_\_\_\_\_ (See page 1 of Instructions for both Applicants)

**ESTIMATED BUDGET FORECAST for 2020-2021 School Year**  
**Note: Student Resources must show an attempt to meet Student Expenses**  
**Please see instructions page 2**

<u>Student Expenses</u>		<u>Student Resources</u>	
Tuition and Fees	\$ _____	Student Contribution	\$ _____
Room and Board	\$ _____	Family Contribution	\$ _____
Books and Supplies	\$ _____	Grants (applied for)	\$ _____
Transportation	\$ _____	Scholarships (appl. For)	\$ _____
Child Care	\$ _____	Tuition Waiver	\$ _____
Personal	\$ _____	Other	\$ _____
Total	\$ _____	Total	\$ _____

**ACTIVITIES: Employment, School, Church, Organizations, Community, Etc.** (Use extra paper if needed)

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**PERSONAL REFERENCES:** Attach current letters of recommendation (see page 1 of Instructions)

Name \_\_\_\_\_ Address/Phone \_\_\_\_\_

Name \_\_\_\_\_ Address/Phone \_\_\_\_\_

**ESSAY:** TYPED AND DOUBLE SPACED

Submit your essay on the subject **“Why I want to continue my education”**. See page 1 of Instructions

**ALL APPLICATIONS MUST BE TURNED IN OR POSTMARKED NO LATER THAN MAY 1, 2020**

**ALL** High School Recipients must send a copy of their acceptance letter from the school they will be attending (Include School ID Number) to the Committee Chairman immediately upon receipt. **Notice must be received no later than August 1, 2020**

STUDENT ID# \_\_\_\_\_ AND SCHOOL ADDRESS FOR TRANSMITTAL OF SCHOLARSHIP CHECK:

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**SIGNED:** \_\_\_\_\_

(Applicant)

**RETURN TO SCHOOL ADVISOR OR**

**MAIL TO: SUE BOOTHE  
 2109 ROAD 44  
 PASCO, WA 99201  
 (509) 547-7629**