

**SCHOLARSHIP APPLICATION  
MURPHY-MARTIN ENDOWMENT FUND  
GRAND LODGE OF MISSISSIPPI F. & A. M.**

INFORMATION AND INSTRUCTION SHEET

Eligibility for a scholarship shall be limited to high school seniors residing in the state of Mississippi and having a father, stepfather, brother, uncle, grandfather, or step-grandfather who is a Master Mason in good standing in a Lodge under the jurisdiction of the Grand Lodge of Mississippi F. & A. M., or if deceased, was in good standing at the time of his death. Consideration will include, but not be limited to, the following: academic record, need, desire, future plans, and industriousness.

The applicant must submit documentation containing the following information:

- completed application form
- minimum ACT score of 16
- high school transcript **which includes first semester grades of the senior year and cumulative GPA**
- two letters of recommendation from school officials (teachers, principal, counselor)
- sponsored by two Master Masons **not related** to the applicant and residing in the same area as the applicant
- official letter of acceptance or tentative acceptance from an institution of higher learning
- recent photograph

Please feel free to submit any other information that you believe would be beneficial to the Scholarship Committee.

Failure to complete the application form or failure to submit any of the above documentation will automatically nullify the applicant's eligibility for consideration.

The school selected by the student may be a public or private college, university, junior college, community college, or vocational-technical school. This is a free gratis non-renewable scholarship for students graduating from high school during the spring of the current school year.

Detach this information sheet and submit the completed application along with the required documentation to your District Deputy Grand Lecturer or to:

Chairman Scholarship Committee  
Grand Lodge of Mississippi F. & A. M.  
P.O. Box 1030  
Meridian, MS 39302

The completed application and all documentation must be received by the Scholarship Committee not later than **March 15** of the applicant's senior year.

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Attach Photo \_\_\_\_\_ Name of DDGL \_\_\_\_\_

District Number \_\_\_\_\_

Name of applicant \_\_\_\_\_

Last

First

Middle

Address \_\_\_\_\_

Street or P.O. Box

Phone

\_\_\_\_\_

City, State, Zip

County

Date of birth \_\_\_\_\_ Date of high school graduation \_\_\_\_\_

Name and location (city) of high school \_\_\_\_\_

\_\_\_\_\_

Principal's name and phone number \_\_\_\_\_

Counselor's name and phone number \_\_\_\_\_

Describe your high school extra-curricular activities (attach additional sheet if necessary)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and address of parents or guardian \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent's occupation      Father \_\_\_\_\_

   Mother \_\_\_\_\_

Approximate combined annual income of parents or guardian \_\_\_\_\_

Number of children in family under the age of 21 (other than yourself) \_\_\_\_\_

Why do you need this assistance? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**FULL NAME (PLEASE PRINT)** and address of closest relative who is a member, or if deceased, was a member in good standing at the time of his death, of a Masonic Lodge under the jurisdiction of the Grand Lodge of Mississippi.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate

[ ] Living

[ ] Deceased

Relationship-- must be father, stepfather, grandfather, step-grandfather, brother, or uncle.

\_\_\_\_\_  
Name, number, and location of the Lodge where he is/was a member

\_\_\_\_\_  
\_\_\_\_\_

Career objective \_\_\_\_\_

Why did you choose this career? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and location of institution you plan to attend. Attach letter of acceptance.

School \_\_\_\_\_

City \_\_\_\_\_

Signatures: Applicant \_\_\_\_\_

Parent or guardian \_\_\_\_\_

**SPONSORS  
TWO MASTER MASONS  
NOT RELATED TO THE APPLICANT**

[Must be in good standing in a Lodge under the Jurisdiction of the  
Grand Lodge of Mississippi and reside in the same area as the applicant]

**#1 FULL NAME (PLEASE PRINT)** \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_  
Street or P.O. Box

\_\_\_\_\_  
City, State, Zip

Phone \_\_\_\_\_

member of \_\_\_\_\_ Lodge, number \_\_\_\_\_

located at \_\_\_\_\_, Mississippi

**#2 FULL NAME (PLEASE PRINT)** \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_  
Street or P.O. Box

\_\_\_\_\_  
City, State, Zip

Phone \_\_\_\_\_

member of \_\_\_\_\_ Lodge, number \_\_\_\_\_

located at \_\_\_\_\_, Mississippi