

DOROTHY M. WESTDYKE SCHOLARSHIP
New Jersey DeMolay

GENERAL INFORMATION AND PLAN OF ADMINISTRATION:

Any high school senior or first year undergraduate college student who is a member in good standing of New Jersey DeMolay is eligible to apply for the Dorothy M. Westdyke Scholarship.

A winner or winners will be recommended by committee, ultimately chosen by Dorothy M. Westdyke herself, and presented at the NJ DeMolay Legion of Honor Dinner on Sunday, October 10th, 2021.

*Questions should be directed to Dad James Chwalyk, Director of Scholarships, at:
james.chwalyk.jr@gmail.com*

DOROTHY M. WESTDYKE SCHOLARSHIP
New Jersey DeMolay

Application # _____

Note: All applications must be submitted no later than September 24, 2021 and are to be typed or written in ink using legible handwriting. All information is for the confidential use of the Scholarship Committee and is subject to verification from other sources. **Do not put identifying names on any pages except this one.**

Return this application to Dad James Chwalyk, Director of Scholarships, 39 Newark Ave., Bloomfield, NJ 07003.

A. APPLICANT

Name:

Residence:

Telephone:

Age:

Date of Birth:

Place of Birth:

CERTIFICATION OF APPLICANT

I HEREBY CERTIFY that I have read the Plan of Administration of the Dorothy M. Westdyke Scholarship Award, and that the facts contained within this application are true and correct to the best of my knowledge. I further agree that if I receive the Dorothy M. Westdyke Scholarship Award, I will accept it subject to the rules and regulations of the Plan of Administration.

Date: _____ **Signature of Applicant:** _____

Member of _____ **Chapter, located in** _____, **New Jersey**

CERTIFICATIONS OF PARENT OR GUARDIAN AND CHAPTER ADVISOR

WE HEREBY DECLARE that we have read the answers of the applicant in the foregoing statement, and that they are correct to the best of our knowledge and belief.

Date: _____ **Parent/Guardian Signature:** _____

Date: _____ **Signature of Chapter Advisor:** _____

Note: Signature does not indicate endorsement of the applicant.

*Attendance Record: (Chapter Advisor, please estimate the percentage of the applicant's attendance at meetings over **the past 3 years**. Refer to other sources if necessary and make the best possible effort to be accurate.)*

This year: _____%

Last year: _____%

Previous year: _____%

B. EDUCATIONAL HISTORY

Previous Schools Attended:

<i>Date Enrolled:</i>	<i>Date Completed:</i>	<i>School Name:</i>	<i>Location:</i>	<i>Courses Completed: (or ALL)</i>

To which schools have you applied for admission?

<i>School Name:</i>	<i>Location:</i>	<i>Have you been notified of acceptance?</i>

What course of study do you intend to pursue, and what profession do you plan to practice?

What financial aid, if any, have you already received to assist in furthering your education?

C. DeMOLAY HISTORY

Date of Initiation: _____ **Chapter:** _____

Chapter Offices Held: _____

Jurisdictional Offices Held: _____

Awards and Honors: _____

D. SOCIAL ACTIVITIES

Name all groups or organizations in which you held active membership or office. (e.g. sports, drama, musical groups, clubs, etc.)

What honors or awards have you earned in school?

What financial prizes, awards, scholarships, etc. have you earned?

E. RELIGIOUS ACTIVITIES

What house of worship do you attend and how often? (e.g. weekly, once a month, holidays only, etc.)

In what religious clubs or organizations do you hold membership or office, and what is your level of activity in each?

Provide any additional information you think pertinent, related to your religious activities.

F. GENERAL INFORMATION

How many siblings do you have and what level of education have they received or are currently receiving?

Briefly summarize your accomplishments in DeMolay and their relevance in furthering your education.

Note: Use additional sheets as necessary, labeling the responses to coordinate with the question(s) and attach to this form.