Harmony Lodge No. 6 A.F. & A.M. Scholarship APPLICATION FORM

Student's Name:					
Address:					
Phone: Email:					
Parents' name(s):					
Parents' occupation(s):					
High School: Graduation Date:					
School Address:					
Counselor: Phone:					
Email:					
What College do you plan to attend?					
Intended major: Minor (if any):					
Have you provided a copy of your High School Transcript? YES / NO (circle one)					
Do you work? Yes / No . If Yes, Where?					
What are your short term goals:					
What are your long term goals:					
List your high school activities and achievements (Cahalastia avvanda slubs and nositions					
List your high-school activities and achievements (Scholastic awards, clubs and positions					
held, special talents and hobbies:					
List volunteer activities in which you have participated:					
Additional Considerations. You may include any additional considerations you would like					
the committee to evaluate pertaining to you or your personal life:					

If space is not enough, please attach additional sheets. Along with the completed form,

Media Consent Form

Harmony Lodge No. 6 may use photographs, slides, videos, or illustrations of scholarship award recipients in newsletters, or publications produced by the Grand Lodge of Texas or its subordinate lodges, in slide presentations, videos, and/or web sites about the scholarships, by the news media in Grand Lodge news coverage, in video productions aired on television produced by or for the Grand Lodge, and in other similar forms of communication. Local media (TV, newspaper, radio stations) frequently want to interview students to add a personal touch to stories. Students' comments may be used in newspapers or broadcast on radio or TV.

I give permission to the Grand Lodge of Texas and its subordinate lodges or the news media to use photographs, slides, videos, illustrations, or interviews of my child. Further, I authorize their use without inspecting or approving the finished product or its specific use.

Students Name:				
Please Print				_
Student's Teacher and School:				
Please Print				
Parent/Guardian Name:				
Please Print				
Parent/Guardian Signature:			Date:	
Street Address:				
City:	State:	Zip:		 _
Please return this completed and	 signed with the appl	lication		