

APPLICATION DEADLINE:  
ONLY COMPLETE APPLICATIONS POSTMARKED OR RECEIVED BEFORE  
MAY 30, 2024 WILL BE CONSIDERED.

**2024 MASONIC CHARITY FOUNDATION  
APPLICATION FOR SCHOLARSHIPS**

Sponsored by the Masonic Charity Foundation of New Jersey

**LILLIAN M. AND FRANK M. TAYLOR SCHOLARSHIP (\$4,000)\***

Scholarships are made available to New Jersey High School Seniors graduating in the Spring 2024 who will be enrolling in the Fall 2024 as full time college freshmen at a 4-year college or university and are the children, step-children, grandchildren or step-grandchildren of living or deceased Master Masons in good standing in a Masonic Lodge of the Grand Lodge of New Jersey.

The scholarships are payable directly to the school for your undergraduate tuition upon receipt of the semester bill and applicable transcript reflecting the earning of at least 12 credits per semester toward graduation and a minimum 3.0 Semester GPA.\* Installments will be for \$500.00 per semester for a total of \$1,000.00 per year for 4 years. Any recipient not completing the academic semester or failing to maintain the academic requirements shall forfeit all future installments.

**\*Note:** The Taylor Scholarships contain an additional requirement of thirty (30) hours of volunteer service to be completed at the Masonic Village at Burlington **each** summer prior to the start of the Fall Term. The Taylor Scholarships are offered to New Jersey High School Seniors only.

**In order for an applicant to qualify for consideration, the student must have maintained a grade average of "B" or 3.0 on a scale of 4.0 over the last two completed years of high school.**

*Completed applications must be submitted to the Masonic Charity Foundation on or before  
MAY 30, 2024 and must include the following:*

- A TRANSCRIPT OF GRADES
- THREE LETTERS OF RECOMMENDATION FROM **TEACHERS**
- STATEMENT OF FINANCIAL NEED WRITTEN BY THE APPLICANT
- A COPY OF THE FAMILY FEDERAL INCOME TAX RETURN FOR THE YEAR **2022**

Mail completed applications to: SCHOLARSHIP COORDINATOR  
MASONIC CHARITY FOUNDATION OF NEW JERSEY  
902 JACKSONVILLE ROAD  
BURLINGTON, NJ 08016

FOR FURTHER INFORMATION CALL: 609-239-3830

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**THIS SECTION MUST BE COMPLETED OR THE APPLICATION WILL NOT BE CONSIDERED**

Name of Sponsoring Mason			I hereby affirm that the aforementioned Master Mason is/was in good standing in
Last	First	Middle	
<i>Please provide the <b>FULL LEGAL</b> name of the Sponsoring Mason.</i>			
Relationship to Applicant			
_____	Father		_____ Lodge
_____	Step-father		Lodge No. _____
_____	Grandfather		(above must be completed by applicant)
_____	Step-Grandfather		
DATED _____			Signature of Scholarship Coordinator Karla P. Lippincott (To be signed upon receipt & verification)

**PREVIOUS FORMS ARE OBSOLETE. THIS FORM REVISED JANUARY 2024 FOR FILING ON OR BEFORE MAY 30, 2024.**

<b>CONFIDENTIAL QUESTIONNAIRE</b>
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- Full Name of Applicant \_\_\_\_\_  

Last
First
Initial
- Home Address \_\_\_\_\_  

No.
Street
City/State
Zip
- Telephone Number (    ) \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_
- E-mail Address \_\_\_\_\_

- **Assets of Parents/Guardians:**

Father/Guardian Annual Income from all Sources: \$ \_\_\_\_\_

Mother/Guardian Annual Income from all Sources: \$ \_\_\_\_\_

Other Assets: Savings: \$ \_\_\_\_\_ Investments: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

Do you own \_\_\_\_ or rent \_\_\_\_ your home? State monthly payments: \$ \_\_\_\_\_

List all real estate owned and its assessed value:

\_\_\_\_\_ Value: \$ \_\_\_\_\_

\_\_\_\_\_ Value: \$ \_\_\_\_\_

\_\_\_\_\_ Value: \$ \_\_\_\_\_

- **Obligations of Parents/Guardians:**

Mortgages on Real Estate: \$ \_\_\_\_\_

Loans: \$ \_\_\_\_\_

Real Estate Taxes: \$ \_\_\_\_\_

Other (Describe) \_\_\_\_\_

\_\_\_\_\_

Number of Dependent Children \_\_\_\_\_

3.

- Academic:

Name of High School \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_

GPA: \_\_\_\_\_ (Minimum Unweighted GPA to Qualify: 3.00 or B on a scale of 4)

Class Rank: \_\_\_\_\_ of \_\_\_\_\_

SAT/ACT Scores: Combined \_\_\_\_\_ Math \_\_\_\_\_ Verbal \_\_\_\_\_ Written \_\_\_\_\_

**BE SURE TO HAVE A COPY OF YOUR HIGH SCHOOL TRANSCRIPT ENCLOSED OR FORWARDED**

- Institutions to which you have applied: Accepted

A. \_\_\_\_\_

B. \_\_\_\_\_

C. \_\_\_\_\_

D. \_\_\_\_\_

- Sports and Related Activities (In School/Out of School) Years Participated

A. \_\_\_\_\_

B. \_\_\_\_\_

C. \_\_\_\_\_

D. \_\_\_\_\_

- Extra-curricular Activities (In School/Out of School)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- **Submit Three (3) Written Recommendations from TEACHERS**

**If recommendations and/or transcripts are not included with this application and are to be submitted separately by teacher(s) or school, it is the applicant's responsibility to ensure their receipt on or before **MAY 30, 2024** or the application will be considered incomplete and disqualified.**

