

# *The Ingstrom Regional Scholarship*



The Educational Foundation, IOOF

## Application Form

# *Odd Fellows & Rebekahs Ingstrom Regional Scholarship*

The Educational Foundation, IOOF

## **ELIGIBILITY REQUIREMENTS**

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To apply for the Odd Fellows & Rebekahs Ingstrom Regional Scholarship, an applicant must:

Hold a high school degree or its equivalent and complete one semester or grading period in a college or university;

Applicants must be, or have a relative who is a member of an Odd Fellow or Rebekah Lodge.

The Application must be signed by the Secretary of the relative's Odd Fellow or Rebekah Lodge, with the Lodge seal affixed, to verify membership;

Leadership qualifications and financial need form an essential part of the Trustee's review process and reflect the objectives sought by the Educational Foundation.

## **HOW TO APPLY**

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Application forms for selection of the Odd Fellows & Rebekahs Ingstrom Regional Scholarship are available from the Educational Foundation Director annually. The Board of Trustees of the Educational Foundation will select winners in the month of June each year.

Completed applications and correspondence in hard copies should be sent to:

Odd Fellows & Rebekahs Ingstrom Scholarship  
P.O. Box 20455  
Winston-Salem, North Carolina 27120

Applications returned by fax or email are not accepted unless original is mailed on the same date by an overnight service.

Due to the large volume of paperwork handled by our office, it is not possible for us to respond to telephone or mail requests on the status of applications. Results are announced by August 1 each year. All applicants will be notified.

## **GENERAL INFORMATION**

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The deadline for submission of applications is May 15th.  
Applications received in the Educational Foundation office after this date will be rejected.

Send only the documents and information requested on the application.  
Do not send any other documentation or surplus information not asked for.

Documents will not be returned. You should, therefore, send copies of all supporting documentation and not the originals except for grade transcripts.

Incomplete applications will not be considered.

The decisions of the Board of Trustees of the Educational Foundation, IOOF are final and confidential.

# Application

## Odd Fellows & Rebekahs Ingstrom Regional Scholarship

### Educational Foundation The Sovereign Grand Lodge Independent Order of Odd Fellows

FOR OFFICE USE ONLY

Date Received

Region Number

#### IMPORTANT INSTRUCTIONS

Answer every question carefully and completely.  
Type or print clearly and legibly.

Date \_\_\_\_\_

1. Name of Applicant \_\_\_\_\_ Telephone Number \_\_\_\_\_

2. Permanent Address \_\_\_\_\_  
Street or Post Office Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

4. College or University where you expect to use the scholarship \_\_\_\_\_

(a) Address of School \_\_\_\_\_  
(Registrar) \_\_\_\_\_ Street or Post Office Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(b) Grade or Year in College Next Semester or Quarter:  Freshman  Sophomore  Junior  Senior  Post Graduate

(c) Degree for which you are preparing: \_\_\_\_\_

5. Father's Name \_\_\_\_\_ 6. Father's Occupation \_\_\_\_\_

7. Father's Address \_\_\_\_\_  
Street or Post Office Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

8. Mother's Name \_\_\_\_\_ 9. Mother's Occupation \_\_\_\_\_

10. Mother's Address \_\_\_\_\_  
Street or Post Office Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

11. Are you married?  YES  NO Number of Dependents \_\_\_\_\_ Name of Spouse \_\_\_\_\_

12. If you are a minor and have a Legal Guardian, give name of Guardian \_\_\_\_\_

13. Guardian's Address \_\_\_\_\_  
Street or Post Office Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

14. Name of Lodge to which a relative belongs \_\_\_\_\_  
Odd Fellow or Rebekah Lodge \_\_\_\_\_ City Where Lodge Is Located \_\_\_\_\_ Lodge Number \_\_\_\_\_

(a) Relative's Name \_\_\_\_\_ Date of Initiation \_\_\_\_\_

(b) Name of Lodge Secretary \_\_\_\_\_

(c) Address of Lodge Secretary \_\_\_\_\_  
Street or Post Office Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

15. Are you receiving or expect to receive any other Scholarships, Fellowships, Grants, Bursaries (Canada) or other student aid ?  YES  NO

If so, please list each with the amount. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16. Do you, or does anyone as payee for you, receive:

(a) Social Security Benefits  YES  NO

(b) Veterans Administration Benefits  YES  NO

(c) G.I. Bill Benefits  YES  NO

(d) Trust Fund Payments  YES  NO

If so, indicate source and monthly or other periodic amount. \_\_\_\_\_





20. Please attach a copy of the following Income Tax Returns :

**YOURS**  
**YOUR SPOUSE'S, IF YOU ARE MARRIED**  
**YOUR LIVING PARENTS'**  
**YOUR GUARDIAN'S, IF APPLICABLE**

You do not have to attach supporting schedules of the tax returns.

**If you are unable to provide this information, your Scholarship Application will not be considered.**

21. Please attach a Transcript of your most recent grades.

22. IMPORTANT. Except for the required Tax Returns and your Grade Transcripts, please do not attach any documents, letters or explanations other than in the space provided for in this application.

## AFFIRMATION OF APPLICANT

To the best of my knowledge and belief, the information reported in this application is complete, accurate and correct.

\_\_\_\_\_  
Signature

## LODGE CERTIFICATION

The Relative listed on this Application in Item 14(a) is a member in good standing of this Lodge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Lodge Name & Number

(Lodge Seal)

\_\_\_\_\_  
Town or City Where Lodge Is Located

\_\_\_\_\_  
Signature of Lodge Secretary

**Please return the  
completed application  
by May 15th to:**

INGSTROM REGIONAL SCHOLARSHIP  
P.O. BOX 20455  
WINSTON-SALEM, NC 27120

THE INGSTROM REGIONAL SCHOLARSHIP IS BASED ON FINANCIAL NEED, SCHOLARSHIP AND LEADERSHIP AND IS AWARDED IN EACH OF THE MEMBERSHIP REGIONS OF THE INDEPENDENT ORDER OF ODD FELLOWS IN NORTH AMERICA.

REQUIREMENTS:

1. ALL APPLICANTS MUST HAVE COMPLETED ONE GRADING PERIOD IN A COLLEGE OR UNIVERSITY.
2. APPLICANTS MUST HAVE A RELATIVE WHO IS A MEMBER OF AN ODD FELLOW OR REBEKAH LODGE.
3. THE APPLICATION MUST BE SIGNED BY THE SECRETARY OF THE ODD FELLOW OR REBEKAH LODGE TO VERIFY MEMBERSHIP.
4. THE COMPLETED APPLICATION IS DUE BY MAY 15TH.

RESULTS OF THE SCHOLARSHIP SELECTION COMMITTEE  
WILL BE SENT TO ALL APPLICANTS BY AUGUST 1ST

## PHOTOGRAPH

Attach here within the box with tape. Need not be an expensive picture but taken within the last year.