

ALBERT P. RUÉRAT DeMOLAY SCHOLARSHIP FUND

Please return this form to: **Chairman of Scholarship Committee**
Ancient Accepted Scottish Rite
2115 Broad Street
Cranston, RI 02905-3396

Not later than: **APRIL 1st**

- 1. _____
Last Name of student applicant First name Middle name School
- 2. _____
Student's home address Street City State Tel. No.
- 3. _____
Student's school address Street City State Tel. No.
- 4. _____
Date of Birth _____ Marital Status

5. When not in school with whom does student live?

Father and Mother Father Mother Stepfather and Mother
Father and Stepmother Other _____

6. Are both parents living? _____

- 7. Name of Father or Guardian _____
Last First Middle
- 8. Address of Father or Guardian _____
Street City State

9. If employed:
Name of employer or firm _____ Occupation
Address _____

- 10. Name of Mother or Guardian _____
Last First Middle
- Address of Mother or Guardian _____
Street City State
- If employed:
Name of firm _____ Occupation
Address _____

11. Family Responsibilities

List here all family dependents, other than parents	Check if shown as dependent on income tax	Complete columns below for children other than applicant who will be in school beyond
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Name and age	Name of school or college	Total costs of tuition, room and board	Amount of probable scholarships
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

Number of dependents _____ Total cost of education for children other than applicant, next year \$ _____

STUDENT'S EXPENSES

For Awards Committee Only - Do not write in This column

- Enter tuition and fees for next academic year as listed in school catalogue \$ _____
- Check one: () will live at school () will commute
- If student will live at school enter charges for room and board. If student will live at home, enter estimated costs of commuting and lunches away from home. \$ _____
- If student is living at school, estimate cost of two round trips a year by economical transportation. Approximate distance in miles from student's home to school. \$ _____ Miles _____
- Estimate cost of all other expenses such as books, clothing, laundry, amusements, etc. \$ _____
- Explain any special situations which will add to the will add to the expenses of the student.
- Total expenses of student (Add 12, 13, 14, 15, 16 and 17) \$ _____

STUDENT'S RESOURCES

Do not write in this column

19. Estimate the amount the student expects to save during the summer. \$ _____
20. Estimate the amount the student expects to earn during the school year. \$ _____
21. List all assets owned by the student, such as securities, bonds, savings, etc.
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
22. Total of (19, 20 and 21) \$ _____
23. List other scholarships received to date.
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
24. Total of (19, 20, 21 and 23) \$ _____

PARENTS' INCOME

Do not write in this column

25. Salaries and wages before taxes
- | | Actual for
<u>last year</u> | Estimated
<u>this year</u> |
|--------|--------------------------------|-------------------------------|
| Father | \$ _____ | \$ _____ |
| Mother | \$ _____ | \$ _____ |
26. Other income (explain)
- | | Actual for
<u>last year</u> | Estimated
<u>this year</u> |
|--------|--------------------------------|-------------------------------|
| Father | \$ _____ | \$ _____ |
| Mother | \$ _____ | \$ _____ |
27. Total Parents' Income \$ _____
- | | a. Present
<u>value</u> | b. Unpaid
<u>mortgage</u> | c. <u>Equity</u> |
|--|----------------------------|------------------------------|------------------|
| 28. Home (if owned) | \$ _____ | \$ _____ | \$ _____ |
| 29. Other real estate (describe) | \$ _____ | \$ _____ | \$ _____ |
| 30. Value of farm or business
(if applicable) | \$ _____ | \$ _____ | \$ _____ |

- 31. Bank accounts
Savings and checking \$ _____
- 32. Other investments (explain) \$ _____
- 33. Total Assets (28, 29, 30, 31 and 32) \$ _____
- 34. Debts (omit mortgage) \$ _____
- 35. Total Net Assets (subtract 34 from 33) \$ _____

UNUSUAL FAMILY EXPENSES

36. Explain any unusual circumstances that affects parents' contribution:

Amount \$ _____

TAX AND OTHER INFORMATION

37. Federal Income Tax paid by both parents: Year before last Last year

\$ _____ \$ _____

Amount of deductions claimed \$ _____

Check () Standard \$ _____

() Itemized

PARENTS' CERTIFICATION

I certify the above is correct. Name _____

Name _____ Date _____

INSTRUCTIONS

After this form is completed, seal it in an envelope and return it to the address appearing at the top of the first page.

This form will be reviewed by a Scholarship Committee composed of educators and persons familiar with matters of finance. The members of the Committee will hold in strict confidence all information supplied in this form. The statements are designed to help the Committee make a fair determination. Please give accurate information in as much detail as possible. If you have any questions, or if you need help to complete this form, please communicate with a member of the Awards Committee through the Secretary of the Scottish Rite, who can be reached at (401) 461-2480

Use reserve side or additional pages, if necessary, to complete any answers for which sufficient space is not provided. Please be sure to identify the number of each item.