



*The Grand Chapter of Colorado*  
*Order of Eastern Star*  
*Eastern Star Training & Religious Leadership Awards Committee*

2495 South Quebec Street, #60  
Denver, Colorado 80231-6068  
(303) 759-5936  
grandsecretary@oescolorado.org

Dear Applicant:

**ESTARL COMMITTEE PURPOSE**

To award scholarships to young men and women preparing for one of the following or related fields:

- Minister,
- Missionary,
- Director of Church Music,
- Director of Religious Education, or
- Director of Youth Leadership.

The Order of the Eastern Star is known throughout the world for its program of sponsoring Eastern Star Training Awards for Religious Leadership. It is our belief that to maintain Peace on Earth there must be stability and understanding in the hearts of all people. Therefore, the Order of the Eastern Star is anxious to assist young men and women who are interested in a full time religious career and whose lives will reflect the precepts of their Heavenly Father.

ESTARL Scholarship Awards presented by the Grand Chapter of Colorado are supported by Colorado Eastern Star members. The funds for the ESTARL awards are from Colorado members and Chapters of the Order of the Eastern Star. The amount of the scholarship may vary from year to year depending on the number of applicants and the amount of money available.

Awards are made for one year, but recipients may apply for a Renewal Award. The money is paid to the school of the applicant's choice, providing it is a regionally accredited school, and the school administers the scholarship. Funds must be used to defray school expenses: tuition, fees, books, room, board. The scholarship is not paid to the student.

## **APPLICANT ELIGIBILITY**

- completed at least two years of college
- be enrolling in a Regionally Accredited College
- attend educational institution as a full-time student
- be preparing for religious service as a Minister, Missionary, Director of Church Music, Director of Religious Education, or Youth Leadership
- be a Colorado resident

*There is no requirement of Masonic or Eastern Star affiliation*

The Order of the Eastern Star does not discriminate on the basis of race, color, national or ethnic origin, or religious belief in the administration of its scholarship program.

For additional information, contact the 2018-2019 Chairman, Robert Walker at 303-525-0627.  
Address: 2929 S. Elm Street, Denver, CO 80222.

ESTARL Committee:

Robert Walker, Chairman

Judy Morrison

Nancy Cayer



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**ESTARL**  
**Eastern Star Training Awards for Religious Leadership**  
**RENEWAL APPLICATION**

(For use by previous ESTARL Award Recipients)

THE GRAND CHAPTER OF COLORADO, ORDER OF THE EASTERN STAR  
2495 S. Quebec St., #60, Denver, CO 80231-6068; Telephone No. 303 759-5936

PLEASE NOTE THE FOLLOWING MNINIMUM REQUIREMENTS TO BE ELIGIBLE FOR THE SCHOLARSHIP:

1. Applicant must have completed at least two (2) years of college.
2. Applicant must be a resident of Colorado. (Attending school outside of Colorado does not Negate residency. If the applicant was a resident of Colorado before attending school, this Constitutes residency.)
3. The College (higher education institution) the applicant plans to attend must be regionally Accredited through North Central Association of Colleges and Schools (NCA) or other Regional Accreditation Commission.
4. Applicant must attend educational institution as a full-time student.
5. Application must be completed, signed, and **post-marked by April 16** prior to the start of the school year for which application is made.

NAME: \_\_\_\_\_  
(Last) (First) (Middle) (Maiden)

DATE OF BIRTH: \_\_\_ / \_\_\_ / \_\_\_ SOC. SEC. NO: \_\_\_\_\_ PHONE \_\_\_\_\_  
(Mo) (Day) (Year)

CURRENT ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PERMANENT ADDRESS: \_\_\_\_\_  
(If different from above) (Street) (City) (State) (Zip)

DATE OF LAST ESTARL AWARD: \_\_\_\_\_ AMOUNT AWARDED: \_\_\_\_\_

Current Academic Standing: Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ Other \_\_\_\_\_

Institution where you plan to use this scholarship: \_\_\_\_\_

Institution address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

To be eligible for renewal of ESTARL scholarship, all of the following information must be included with the application:

1. Personal letter from the applicant including your progress towards future goals and objectives.
2. An Official Transcript from your educational institution showing the most recent quarter or semester completed. Grade reports will not be accepted.

All applications must include the above and be signed by the applicant to be considered. Applications must be post-marked by April 16 prior to the start of the school year for which application is made.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mail completed application to: Grand Chapter of Colorado Order of the Eastern Star  
ESTARL Chairman  
2495 S. Quebec St #60  
Denver, CO 80231-6068

**ESTARL**  
**Eastern Star Training Awards for Religious Leadership**  
**SCHOLARSHIP APPLICATION**

THE GRAND CHAPTER OF COLORADO, ORDER OF THE EASTERN STAR  
2495 S. Quebec St., #60, Denver, CO 80231-6068; Telephone No. 303 759-5936

PLEASE NOTE THE FOLLOWING MNINIMUM REQUIREMENTS TO BE ELIGIBLE FOR THE SCHOLARSHIP:

1. Applicant must have completed at least two (2) years of college.
2. Applicant must be a resident of Colorado. (Attending school outside of Colorado does not Negate residency. If the applicant was a resident of Colorado before attending school, this Constitutes residency.)
3. The College (higher education institution) the applicant plans to attend must be regionally Accredited through North Central Association of Colleges and Schools (NCA) or other Regional Accreditation Commission.
4. Applicant must attend educational institution as a full-time student.
5. Application must be completed, signed, and **post-marked by April 16** prior to the start of the school year for which application is made.

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(Last) (First) (Middle) (Maiden)

DATE OF BIRTH: \_\_\_ / \_\_\_ / \_\_\_ SOC. SEC. NO: \_\_\_\_\_ PHONE \_\_\_\_\_  
(Mo) (Day) (Year)

CURRENT ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PERMANENT ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PARENTS' NAMES, Father: \_\_\_\_\_ MOTHER: \_\_\_\_\_  
(Last) (First) (Middle) (Last) (First) (Middle)

FATHER'S ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

MOTHER'S ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PARENT'S OCCUPATION, Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Will your parents be assisting you with your educational expenses? Yes \_\_\_\_\_ No \_\_\_\_\_  
If your parents are limited in their ability to assist you with your educational expenses, please explain  
The reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Type of Religious Training Planned: Minister \_\_\_ Director of Church Music \_\_\_ Missionary \_\_\_  
Director of Religious Education \_\_\_ Other \_\_\_\_\_

High School from which you graduated: \_\_\_\_\_ Year: \_\_\_\_\_  
(Name) (City) (State)

List all colleges attended and complete addresses (if more space needed, please use attachment):  
\_\_\_\_\_  
\_\_\_\_\_

Total credit hours completed at date of this application: \_\_\_\_\_

Current Academic Standing: Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ Other \_\_\_\_\_

Institution where you plan to use this scholarship: \_\_\_\_\_

Institution address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Are you now, or have you previously been, a scholarship recipient? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the name of scholarship, amount of award, and period of time granted:  
\_\_\_\_\_  
\_\_\_\_\_

List other types of financial assistance you are, or will be receiving. Describe the type of assistance And give the amount. (If more space needed, please use separate attachment.)  
\_\_\_\_\_  
\_\_\_\_\_

To be eligible for the ESTARL scholarship, all of the following information must be included with the application:

1. Personal letter from the applicant including the following:
  - a. Your goals and objectives for the future.
  - b. Why you require financial assistance.
  - c. Why you feel you should be selected.
2. Three letters of recommendation, one from each of the following:
  - a. Minister or religious Leader
  - b. School official or teacher
  - c. Business or professional person
3. List of activities in which you are now involved and the major activities in recent school years.
4. List of extra-curricular work, such as with church, clubs etc. Include any part-time employment you currently have.
5. An Official Transcript from your educational institution showing the most recent quarter or semester completed. Grade reports will not be accepted.

All applications must include the above and be signed by the applicant to be considered. Applications must be post-marked by April 16 prior to the start of the school year for which application is made.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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