name: (office use only)

## The Martin A. Kiwisar Scholarship Application Form and Information

## As administered by:

The Board of Trustees Vegas Lodge #32, F. & A.M. 632 E. Charleston Blvd. Las Vegas, NV 89104-1509

Ph: 702.382.1174 Fax: 702.382.6947



The Martin A. Kiwisar Scholarship was established by the Will of Mr. Kiwisar who died in 1952. Mr. Kiwisar was a member of Vegas Lodge #32 and it was his intent to provide, "...for the education of poor children of Las Vegas, Nevada...". Under the administration of the Board of Trustees of Vegas Lodge #32, F. & A.M. (a Masonic Lodge) and with the assistance of the local court, the basic eligibility requirements to apply for a scholarship award are as follows:

- 1. The applicant must be a graduate of a Las Vegas Area High School.
- 2. The Term "Las Vegas" will include the entire Las Vegas Valley, including the cities of Las Vegas, North Las Vegas, Henderson as well as those unincorporated townships in the geographic area, known as the Las Vegas Valley.

Further note: This Scholarship is open to all students, without regard to race, color, religion, national origin, or any Masonic affiliation, who meet the minimum eligibility requirements as stated above.

<b>Biographical Information:</b> (Please Type o	r Print all information)
1. Full Name:	Soc. Sec#:
	Date:
Family Information:	
1. Parents	
	Father's Name:
☐ Living ☐ Deceased	Father's Name: Living Deceased
Are your parents currently:   Married	Separated Divorced
2. Siblings (Please list names and ages):	
, , ,	our natural parents, briefly explain your current family
Character and Reference Information	
	orts Groups of which you are currently a member or ars:
2. List any Special Awards or Recognition you	have received:
	Thave received.
character references:	phone numbers of two individuals, other than family, as
b)	
4. How did you hear about this Scholarship: _	
5 11	
5. Have you ever been arrested, or convicted If Yes, explain the circumstances:	of a crime?    Yes    INo

## **Educational Information**

1. List the High schools you have attended and,	or graduated from in the Las Vegas Valley:
<ol><li>How long have you lived in the Las Vegas Vol</li></ol>	alley?
3. Please attach a copy of your High School G	rade Transcript to this application.
4. If you are currently enrolled in College or a 1	Trade school what is your current GPA?
Note: Attach copy of current Grade Report to	o application.
5. What Course of study are you taking?	
6. What career plans do you intend with your E	Education?
7. What College, University or Trade School do	you plan to attend?
requirements, if you attend: Full Time: 9. What are the Tuition rates? \$ per cre	dit hour.
10. What do you estimate your Educational and	a living expenses will be per Semester?
<ul><li>11. How many credits do you plan on taking?</li><li>12. Do you plan on working while attending so</li><li>If yes please explain type of work, how ma</li></ul>	hool? 🗖 Yes 🔲 No
Financial Information	
Parents:	
1. Father's annual salary \$	Other Income \$
Employer:	
2. Mother's annual salary \$	Other Income \$
Employer:	
3. Current Value of Parent's Home \$	Combined Net Worth\$
Applicant:	
4. Are you currently employed?   Yes	⊒ No
If so, where?	
5. If you are not living at home, who provide	es you with your main financial support? Example:
<ol><li>6. What other Financial/Educational assists received?</li></ol>	ance, or monetary awards have you applied for, or
7. Briefly, state why you need financial assis	stance to attend school:
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## **Statement of Policy:**

- 1. The Board of Trustees of Vegas Lodge F.&A.M. in their sole discretion shall determine the recipients of the Scholarship Awards as well as the amount awarded. The decisions of the Board of Trustees shall be final.
- 2. The factors that the Board of Trustees will consider in the overall decision process in determining the scholarship awards will be: Financial Need, Scholastic Ability and Character.
- 3. All scholarship awards will be made on an individual case by case basis as well as a semester by semester basis. The granting of an award for one semester is no guarantee of a grant for any subsequent semester.
- 4. The applicant and/or recipient understands that any misleading or false information supplied on this application or delivered subsequently to the Board of Trustees would be sufficient reason to decline or terminate financial assistance to the applicant and/or recipient.
- 5. The applicant and/or recipient agrees to keep the Board of Trustees informed of their educational status and current address and further to supply the Board of Trustees with updated Grade reports when requested, by the Board of Trustees.

The undersigned in completing this application for the Kiwisar Scholarship hereby states that the information contained in this application is true and honest. Further, the undersigned has read the Statement of Policy above and agrees to be bound by it.

Signature		Date	
	TRUST	TEE USE ONLY ————	
Semester:		Amount \$	
Semester:	Date:	Amount \$	GPA:
Semester:	Date:	Amount \$	GPA:
Semester:	Date:	Amount \$	GPA:
Semester:	Date:	Amount \$	GPA:
Semester:	Date:	Amount \$	GPA:
Semester:	Date:	Amount \$	GPA:
Semester:	Date:	Amount \$	GPA:
Projected Graduati	on Date:		rev: June 202