



The Ohio Council of Deliberation
Ancient and Accepted Scottish Rite of Freemasonry
Prince Hall Affiliation - Northern Jurisdiction, U.S.A. Inc.



(TO BE COMPLETED BY STUDENT APPLICANT)

ALL APPLICATIONS MUST BE TYPED

ACADEMIC YEAR 2021

TODAY'S DATE: _____

2020 RECIPIENTS need only to complete the items proceeded by the double asterisk ()**

****I will be a Freshman _____ Sophomore _____ Junior _____ Senior _____ in College or Other Status _____**

PERSONAL INFORMATION

****Name:** _____
Last First Middle

Date of Birth: _____ **Gender:** Male _____ Female _____

****Home Address:** _____ **Telephone:** () _____
Street City State Zip

****Email** _____ **** Cell phone** () _____

PARENT or GUARDIAN:

Father: _____
Last First Occupation Annual Salary

Mother: _____
Last First Occupation Annual Salary

Guardian: _____
Last First Occupation Annual Salary

Number of Sibling(s) in your home : _____ **Ages:** _____ **Siblings now in college** _____

Are You a Member of the Prince Hall Family: Yes _____ No _____ **Pythagoran** _____ **Girls Assembly:** _____

EDUCATIONAL INFORMATION

**** 2020 RECIPIENTS - "College Transcript" Replaces the following High School Academic Information**

Name of High School I attend: _____ **Telephone:** () _____

Class Rank: _____ **GPA:** _____ **SAT / Test Score:** _____ **ACT:** _____

College or Technical School I Have Been Accepted To: _____

Location: _____ **What is your intended Major:** _____

ATTACH a copy of your SCHOOL ACCEPTANCE LETTER and FINANCIAL AID LETTER.

My Estimated Costs of Education for the Academic Year are as follows:

Tuition: \$ _____ **Room and Board:** \$ _____ **Books and Supplies:** _____

Laboratory Fees: _____ **Total \$** _____.

My Family and I will pay: \$ _____ **My unmet needs are:** \$ _____

I have received / or have been promised Financial Aid from the following sources:

- | | |
|----------|----------|
| 1) _____ | 4) _____ |
| 2) _____ | 5) _____ |
| 3) _____ | 6) _____ |

Attach a copy of your School's Financial Aid Award notification letter (not the application) from the School you will/ or currently attend. Send it as soon as possible, but no later than JUNE 30, 2021. You may e-mail any questions to Gerald S. Friason at – gsf33@fuse.net - "OCOD 2021" must be in the subject line.

CHARACTER REFERENCE: (Not a family member)

1) Name _____ **Occupation:** _____

Address _____
Street City State Zip

Advisor (if any): Pythagorans or Girls Assembly:

1) Name _____ **Telephone/email:** _____

Address _____
Street City State Zip

NOTE:

1. Blanks spaces not completed or NA answers may disqualify your consideration.
2. **A typewritten statement must be attached** on the subject "**Why I Want a College Education**", including your **vocational preference** and/or **goals**, your **extracurricular activities** and **community activities**.
3. After the signature, give this completed application to the appropriate school official who in turn will attach an official transcript (to include: this Class Year's first semester grades, class rank, unweighted GPA, test scores including the Ohio Graduation Test, ACT/SAT test results); and recommendations. Forward the entire application directly to the address shown below.
4. Two letters of recommendations from your counselor, teacher, administrator, advisor, minister or employer.
- **5. (CONTINUING STUDENTS)** Update your life goal in one hundred words or less.

SIGNATURES: We certify the above information to be true, correct and complete.
We authorize you to share this information with your associates.

Applicant's Signature

Parent / Guardian's Signature

PLEASE RETURN THIS FORM TO:

Gerald S. Friason
12010 Springdale Lake Drive
Cincinnati, OH 45246
Tel: 513-742-8983 (H) 513-509-7503 (C)