GRAND CHAPTER



of the State of Minnesota

ORDER OF THE EASTERN STAR

Organized 1878

**M. Josephine Ruhsam Scholarship**



M. Josephine Ruhsam was the Right Worthy Associate Grand Matron when she passed away in 1983. Money set aside for her year and donations as well as memorials were put together to form a scholarship in her memory. A committee was established to set the process in place and to award scholarships. The first scholarships were awarded in May 1988.

**To the Applicant:**

1. The **Application** must be accurate and complete. The applicant must be a Minnesota resident who will be completing his/her secondary education in this academic year. Incomplete applications will not be considered.
2. The applicant’s **Personal Statement** should describe his/her goals for the future and financial need.
3. The applicant’s **Activities Form** should describe school activities, community volunteer activities and outstanding achievements/awards received while in high school (grades 9-12).
4. A high school principal, counselor, or teacher should complete the **Personal Reference Form.**
5. A member in good standing of the Order of the Eastern Star needs to recommend the applicant for the scholarship and must complete the **Order of the Eastern Star Sponsorship Form.** The Chapter Secretary must complete and sign the form.
6. The **Scholastic Record of the Student Form** should be completed by a high school official and submitted with the applicant’s **High School Transcript** that includes the most recent grading period.
7. All information will be kept confidential and will be used only by the Scholarship Committee. **Be sure that all forms are sent to the chair.**

**All Documents (Items #1-#6) are to be submitted in ONE envelope to the Scholarship Committee Chairman and postmarked no later than February 15, 2024. The completed application should be sent to:**

**Tracy Keeling, PGM**

**6470 Kingfisher Ln**

**Eden Prairie, MN 55346**

**952-300-8005**

**tkeeling@umn.edu**

The Scholarship Committee will review all complete applications and applicants will be notified of the Committee’s decision before the 2024 Grand Chapter Session to be held in St. Cloud May 2 - 4, 2024. Questions regarding the scholarship or application process should be directed to the Committee Chairperson at either 952-300-8005 or tkeeling@umn.edu.

**APPLICATION FOR THE M. JOSEPHINE RUHSAM SCHOLARSHIP**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant’s Last Name First Name Middle Name

2.Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender (M or F) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.Are you a citizen of the United States? Yes\_\_\_\_\_ No\_\_\_\_\_ If not, what country?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant’s Home Address City State Zip Code

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone Number E-mail Address

6.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of High School Address City State Zip Code

7.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Parent(s) or Guardian(s) Name Address and Telephone (if different from applicant)

8.List your career or vocational choices:

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9A. To which Post-Secondary School(s) have you applied?

9B. To which Post-Secondary Schools(s) have you been accepted?

9C. What is the name and address of the Post-Secondary School you plan to attend next year?

10. List your employment while in high school:

 Place of employment Nature of Work Dates of Hire Hours/Week

**M. JOSEPHINE RUHSAM SCHOLARSHIP PROGRAM**

Minnesota Grand Chapter

Order of the Eastern Star

Applicant’s Last Name First Name Middle Name

Signature of Applicant

**Personal Statement:** Describe your personal goals, plan for post-secondary education, and financial need. Print in black ink or attach a type-written page.

**M. JOSEPHINE RUHSAM SCHOLARSHIP PROGRAM**

Minnesota Grand Chapter

Order of the Eastern Star

Applicant’s Last Name First Name Middle Name

Signature of Applicant

**ACTIVITIES:** List the school activities and community volunteer activities you participated in during high school (grades 9-12). Indicate any outstanding achievements or awards you have received. Print in black ink or attach a type-written page.

**SCHOOL ACTIVITIES:**

 **ACTIVITY GRADE(S) ACHIEVEMENTS/AWARDS**

**COMMUNITY VOLUNTEER ACTIVITIES:**

 **ACTIVITY GRADE(S) ACHIEVEMENTS/AWARDS**

**M. JOSEPHINE RUHSAM SCHOLARSHIP PROGRAM**

Minnesota Grand Chapter

Order of the Eastern Star

Applicant’s Last Name First Name Middle Name

Signature of Applicant

**PERSONAL REFERENCE:** This is to be completed by a high school principal, counselor, or teacher. A separate letter on school letterhead is required and must be attached to this form to accompany the student’s application. All information will be kept confidential and will remain in the possession of the Scholarship Committee. The application will be destroyed following the selection of the scholarship recipients.

Print Name and Title of School Official

Signature of School Official Date

**M. JOSEPHINE RUHSAM SCHOLARSHIP PROGRAM**

Minnesota Grand Chapter

Order of the Eastern Star

Applicant’s Last Name First Name Middle Name

Signature of Applicant

**ORDER OF THE EASTERN STAR SPONSORSHIP:** Please print in black ink. To be completed by a member of the Order of the Eastern Star in good standing in a Minnesota subordinate chapter who recommends the applicant for this scholarship.

This form must accompany the applicant’s application.

I know this applicant and believe he/she possesses the qualities desirable of an applicant of the M. Josephine Ruhsam Scholarship and believe he/she has the potential for successful attainment of his/her educational goals.

Student sponsored by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name – Please Print

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name – Signature Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name and Number of Minnesota O.E.S. Chapter

I verify that this sponsor is a member in good standing.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Chapter Secretary Name – Please Print Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature

**Chapter Seal**

**M. JOSEPHINE RUHSAM SCHOLARSHIP PROGRAM**

Minnesota Grand Chapter

Order of the Eastern Star

Applicant’s Last Name First Name Middle Name

Signature of Applicant

**SCHOLASTIC RECORD OF STUDENT/HIGH SCHOOL TRANSCRIPT:** Please print in black ink.

Please provide the following:

1. Unweighted Grade Point Average at the end of the most recent academic term \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Submit a High School transcript which includes the most recent grading period.

Print Name and Title of School Official

Signature of School Official Date