

**AINAD SHRINERS  
JAMES C. GROOM SCHOLARSHIP FUND**

**SCHOLARSHIP APPLICATION GENERAL  
INFORMATION**

To qualify, an applicant must have been a resident in the Ainad Shriners jurisdiction for at least twenty-four (24) months prior to the application. Applications from other Illinois residents will be considered should there not be a qualified applicant from the jurisdiction of Ainad Shriners.

An applicant must be a full-time student (as defined by his/her academic institution) pursuing an undergraduate degree at an accredited college or university.

An applicant must be a child, grandchild, nephew, or niece of a member in good standing (or if deceased, in good standing at the time of death) of any Shriners International affiliate.

An applicant must have a high school cumulative grade point average of at least 3.0 (B) on a four-point scale. An applicant must have scored in the upper thirty-three (33) percentile on a college entrance examination, e.g., SAT or ACT.

The scholarship check will be forwarded to the student's college or university to be credited to his/her account. Checks will be forwarded based on the academic performance of the previous semester or quarter.

This application, official high school or college transcript and letters of recommendation must be received by April 1<sup>st</sup> of the year in which the application is made. The aforementioned documents will become the property of the Ainad Shriners James C. Groom Scholarship Fund.

The scholarship will be awarded without regard to race, gender, religion, age, or handicap at the discretion of the Scholarship Selection Committee at its spring meeting.

The scholarship may be renewed for a total of four years. The recipient must maintain a cumulative grade point average of at least 3.0 (B) on a four-point scale and submit their most recent transcripts by April 1<sup>st</sup>.

Send the completed application, official transcript(s), and letters of recommendation to:

**AINAD SHRINERS JAMES C. GROOM SCHOLARSHIP FUND  
Henry A. Haisch Jr., Chairman  
917 Edgewood Dr.  
O'Fallon, IL 62269**





**ACADEMIC PREPARATION**  
**If you are a high school student, fill out Section A**

**SECTION A**

Name of High School: \_\_\_\_\_

Address: \_\_\_\_\_

Class Rank: \_\_\_\_\_ out of \_\_\_\_\_ Grade Point Average: \_\_\_\_\_ out of \_\_\_\_\_  
(Number) (Class Size) (Number) (Maximum)

ACT Scores: \_\_\_\_\_ SAT Scores: \_\_\_\_\_ Expected Date of Graduation: \_\_\_\_\_

Academic Honors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Offices Appointed/Elected to: \_\_\_\_\_ year \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ year \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ year \_\_\_\_\_ to \_\_\_\_\_

Please send an official copy of your high school transcript, a copy of your ACT/SAT score, and a personal recommendation (form enclosed) by April 1<sup>st</sup>.

**SECTION B – MUST BE COMPLETED**

College to be attended/enrolled: \_\_\_\_\_

Address of College: \_\_\_\_\_

Major Field of Study: \_\_\_\_\_

Minor Field of Study: \_\_\_\_\_

Academic Status as of next Sept.: \_\_\_\_ (\_\_\_\_) Freshman \_\_\_\_ (\_\_\_\_) Sophomore \_\_\_\_ (\_\_\_\_) Junior \_\_\_\_ (\_\_\_\_) Senior

Academic Honors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Grade Point Average: \_\_\_\_\_ out of \_\_\_\_\_  
(Number) (Maximum)

Extracurricular school related interests and activities: \_\_\_\_\_  
\_\_\_\_\_

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**AINAD SHRINERS JAMES C. GROOM SCHOLARSHIP FUND Professional Letter of Recommendation**

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This section to be completed by the Applicant:

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

**Please rate the applicant. Compare with other of like age and position.**

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	Upper 5%	Upper 10%	Upper 25%	Upper 50%	Lower 50%	No Basis For Judgement
Intellectual achievement						
General knowledge						
Oral expression						
Written expression						
Working with others						
Emotional maturity						
Imagination/creativity						

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General assessment of overall academic ability: Of the approximately \_\_\_\_\_ students at a comparable education level that I have known in recent years, I would rate this applicant in the upper \_\_\_\_\_ percent.

In addition, please write a statement on the reverse side indicating your opinion of the applicant's ability to pursue studies and to achieve professional success in his or her chosen field. Any pertinent information is valuable, but an evaluation of strengths and weaknesses is more helpful than general praise.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Position: \_\_\_\_\_ Address: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_ Years Known: \_\_\_\_\_

Date: \_\_\_\_\_

**RETURN TO:**

**AINAD SHRINERS JAMES C. GROOM SCHOLARSHIP FUND  
C/O Henry A. Haisch Jr., Chairman  
917 Edgewood Dr.  
O'Fallon, IL 62269**

**AINAD SHRINERS JAMES C. GROOM SCHOLARSHIP FUND**

**Personal Letter of Recommendation**

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This section to be completed by the Applicant:

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

**Please write a statement below indicating your opinion of the applicant's ability to pursue studies and to achieve professional success in his or her chosen field. Any pertinent information is valuable, but an evaluation of strengths and weaknesses is more helpful than general praise.**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Position: \_\_\_\_\_ Address: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_ Years known: \_\_\_\_\_

Date: \_\_\_\_\_

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