



**Dr. Frank Caputo
"Masonic Scholarship"
Application Form 2024**

NAME _____

ADDRESS _____

SOCIAL SECURITY NO. _____ PHONE NO. _____

G.P.A. _____ CLASS RANK _____

COLLEGE OR UNIVERSITY TO ATTEND _____

PROGRAM YOU PLAN TO PURSUE _____

PARENTS NAME:
MR./MRS. _____

ADDRESS _____

#DEPENDANTS _____ OCCUPATION _____

MR./MRS. (if different) _____

ADDRESS _____

#DEPENDENTS _____ OCCUPATION _____

INCOME; Optional _____

On a separate sheet of paper list your school activities & awards received, community work and involvement.
On another sheet of paper explain why you are deserving of this award. (One paragraph to one page only)
You may furnish, although not required, one or more letters of recommendation from an adult who has known you for several years



PLEASE RETURN APPLICATION BY MAY 1, 2024 To:

Tuscarawas Lodge #59 F&AM
PO Box 163
Dover, OH 44622