



Grand Lodge of California

Independent Order of Odd Fellows

HIGHER EDUCATION FUND

14414 Oak St. #B
Saratoga, CA. 95070

HIGHER EDUCATION FUND COMMITTEE – APPLICATION FORM

Applicant _____ Birthday: _____ Age: _____

Address _____ City _____ St _____ Zip _____

Sponsoring Member _____ Relationship: _____

Address _____ City _____ St _____ Zip _____

Sponsoring Lodge(s) _____ # _____ - _____ # _____

Address _____ City _____ St _____ Zip _____

SCHOOLS ATTENDED

Name(s)	Location(s)	Date(s)	Graduated	G.P.A.
_____	_____	_____	YES / NO	_____
_____	_____	_____	YES / NO	_____
_____	_____	_____	YES / NO	_____

LIST COMMUNITY & EXTRA CURRICULAR ACTIVITIES

- _____
- _____
- _____
- _____

Current School: _____ Class: _____

Current Curriculum: _____ Major: _____ Units: _____

PERSONAL EXPLANATION OF YOUR REQUEST FOR ASSISTANCE

NON-PARENT PERSONAL REFERENCE

FOR COMMITTEE USE ONLY

Name: _____ Relationship: _____

Approval Denial Hold

Address: _____

Name: _____ Initials _____

Applicant Signature: _____ Date: _____

Name: _____ Initials _____