

## **Year 2025 Scholarship Application Edward Leon Duhamel Scholarship**

The Edward Leon Duhamel Scholarship provides tuition support for post-secondary education to descendants of members of the Franklin Lodge of Freemasons in Westerly, Rhode Island. Applicants must be descendants of a member of Franklin Lodge or descendants of other freemasons in Rhode Island. Up to four scholarships ranging from approximately \$500 to \$1,000 will be given annually with awards renewable up to four years if the student maintains good academic standing. Preference is given to prior year's recipients. Graduate students are ineligible.

### **QUALIFICATION CRITERIA:**

In order to qualify as an applicant, you must meet the following criteria:

- Able to demonstrate that you are a descendant of a member of Franklin Lodge in Westerly, Rhode Island, or a descendant of another RI Freemason.
- Able to demonstrate scholastic achievement and good citizenship.
- Able to demonstrate enrollment status (full-time/part-time).
- Able to demonstrate that you have been accepted into or continuing a program of study within an accredited post-secondary institution.

### **A COMPLETE APPLICATION INCLUDES:**

- A completed application form INCLUDING THIS INSTRUCTION SHEET
- One essay and one resume as two separate attachments
- Notarized copies of your financial aid award letter and an enrollment status document from your school as two separate attachments
- A notarized copy of your Student Aid Report Summary Page with an Estimated Family Financial Contribution as an attachment
- A notarized copy of your most recent official transcript or an official sealed (unopened) transcript as an attachment
- Notarized proof of the relationship between the applicant and the member of the Masonic Lodge as an attachment

### **DEADLINE:**

Your application must be legibly postmarked by July 3, 2025. All applicants are evaluated using the same essential information. Please provide all requested items and answer application questions completely. Incomplete applications will not be considered; if signatures are missing, the application is considered incomplete.

Please mail your complete application, including all required attachments, in ONE envelope to:

Edward Leon Duhamel Scholarship Recipient Selection Committee.

c/o Edward Lowe

26 Brook Drive

Hope Valley, RI 02832-2504

Questions? Contact Edward Lowe, current Committee chairman, at Ed01Lowe@aol.com

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**A. STUDENT INFORMATION**

Name:

*last/first/middle initial* \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Birth Date: *mm/dd/yyyy* \_\_\_\_\_

Permanent Address:

*Street/Apt# :* \_\_\_\_\_

*city/state/ zip:* \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**DEPENDENT STUDENTS:**

A. Parent, stepparent or guardian name / relationship to student / permanent address:

\_\_\_\_\_  
*Name/relationship to student/permanent address*

B. Parent, stepparent or guardian name /relationship to student /permanent address:

\_\_\_\_\_  
*Name/relationship to student/permanent address*

**INDEPENDENT STUDENTS:**

Are you married?  Yes  No

Spouse name /age /permanent address:

\_\_\_\_\_  
*Name/age/permanent address*

**Year 2025 Scholarship Application  
Edward Leon Duhamel Scholarship**

**B. ACADEMIC INFORMATION**

Attach an official copy of your most recent school transcript (college transcript if in college or high school transcript if in high school).

What was your highest SAT score? Math \_\_\_\_\_ Verbal \_\_\_\_\_ Class Rank \_\_\_\_\_

Post-Secondary Institution for which aid is requested (name, address, website URL):

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In Fall 2025, I will be a (*circle one*): Freshman /Sophomore /Junior /Senior

Expected college graduation date (*month/year*) \_\_\_\_\_

Are you (*circle one*): Accepted /Enrolled /Awaiting a decision

Enrollment status (*circle one*) : Full-time /Part-time

Housing status (*circle one*): On campus /Off campus /At home with family

High school attended (name, address, website URL):

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Graduation date from High School

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Intended field of study and degree sought:

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**C. STUDENT ACTIVITIES**

Please attach a resume describing employment and a list of activities that you participate in, including: positions held, dates of participation, estimated time spent on each activity and any special honors received.

**D. ESSAY**

Please attach an essay in which you tell us what you hope you will be doing in your professional life 10 years from now. (300-word limit, double-spaced, typed)

**E. FINANCIAL AID INFORMATION**

Please attach the following two documents to the completed application form:

- 1) A notarized copy of your financial aid award letter from the college or institute of higher education you will be attending (if you are undecided, please send notarized copies of award letters from your top two choices).
- 2) A notarized copy of only the summary page from your final Student Aid Report (SAR). The Award Summary Page showing the estimated family contribution, must also contain the student's information (name, etc.)

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**E. FINANCIAL AID INFORMATION (continued)**

**Cost of education per year:**

<b>EXPENSES</b>	<b>Amount</b>	<b>Total</b>
Tuition and Fees	\$ _____	
Room and Board	\$ _____	
Books and Supplies	\$ _____	
Transportation	\$ _____	
<b>TOTAL EXPENSES</b>		<b>\$ _____ A</b>

<b>INCOME</b>	<b>Name of Grant or Scholarship</b>	
Federal, State, and Other Awards (list loans and work study in Loan section below)	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
College Grants and Scholarships (list loans and work study in Loan section below)	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____

**TOTAL GRANTS AND SCHOLARSHIPS** \$ \_\_\_\_\_ **B**

Estimated Family Contribution (EFC) from Student Aid Report (SAR) \$ \_\_\_\_\_ **C**

**TOTAL INCOME (Item B plus Item C)** \$ \_\_\_\_\_ **D**

**Financial Need (Item A minus Item D)** \$ \_\_\_\_\_ **E**

<b>LOANS AND WORK STUDY</b>	<b>Name of Source</b>	
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____

**TOTAL LOANS AND WORK STUDY** \$ \_\_\_\_\_

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Edward Leon Duhamel Scholarship**

**F. ADDITIONAL INFORMATION**

Please provide a notarized signed statement of lodge member's relationship to student and lodge member's role in lodge; you must include the Lodge member's name, lodge name, lodge number and lodge address.

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How did you learn about this award?

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***Special Circumstances: Do you have any unusual personal, financial or family circumstances that warrant special attention by the selection committee? Please be specific. (You may add a page describing Special Circumstances; 100-word limit, double-spaced, typed.)***

**G. CERTIFICATION AND SIGNATURES**

I, (we) certify that the information on this form is true and complete to the best of my (our) knowledge. If requested by an authorized official of the Scholarship Selection Committee, I (we) agree to provide documentation for information given on this form. I (we) realize that failure to comply with a request for additional information may prevent the applicant from further consideration for a scholarship.

*Applicant's signature / date*

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*Parent/Stepparent/Guardian's signature (if applicant is dependent) / date*

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Send completed application and all required attachments together in ONE ENVELOPE, legibly postmarked by July 3, 2025 to:

Edward Leon Duhamel Scholarship Recipient Selection Cmte  
c/o Edward Lowe  
26 Brook Drive  
Hope Valley, RI 02832-2504