





Lincoln, IL 62656

GENERAL INSTRUCTIONS

FOR APPLICATIONS SUBMITTED BY USPS MAIL.

PLEASE FOLLOW DIRECTIONS CAREFULLY AND COMPLETELY, FAILURE TO DO SO WILL RESULT IN REJECTION OF APPLICATION

FOR HIGH SCHOOL SENIORS ONLY

- 1. Applicant must use the current official Odd Fellow-Rebekah scholarship form which must be dated and signed by the Student, parent(s), or guardian(s) and lodge official(s) where applicable. (see instruction 12) All applications and statements are required to be signed. Typewritten applications are preferred or must be legibly handwritten. A recent photograph of the applicant, with a signature on the reverse side, must be firmly attached to the application. If signatures are missing, the application will NOT be accepted.
- 2. Applications and all supporting documents must be in English.
- 3. Current Official high school transcript of the student's records if presently attending a school of higher education, must be submitted. Records may be photocopies that bear an original signature or seal of the proper authority.
- 4. All applications must be properly bound on the left by a clear plastic report folder. Please do not staple.
- 5. The applicant shall prepare a statement **RESTRICTED to 150 words or less**, setting forth his/her vocational or professional goal. Relate how past, present, and future activities make the accomplishment of this goal probable. This must be <u>typed</u>, properly signed, and enclosed with all supporting materials. The application will be disqualified if the essay is not included and properly signed.
- 6. A current, dated, and signed recommendation, **RESTRICTED to 150 words or less,** from the Principal or Counselor in authority and from one teacher at the school the applicant is currently attending is required. Each recommendation must be enclosed in a sealed envelope, signed over the seal, and returned to the student for enclosure in the scholarship packet.
- 7. Include one letter of endorsement from a responsible community (NON-SCHOOL) person. **This person should not be related to the applicant,** but can be a businessperson, minister, or civic leader. The person should be capable of reporting the applicant's participation in the community, in terms of work, service, leadership, notable skills, and outstanding recognition. Do refer to school accomplishments. This should be enclosed in a sealed envelope, signed over the seal, and returned to the student for enclosure in the scholarship packet.







Lincoln, IL 62656

P.O. BOX248

INSTRUCTIONS CONTINUED

- 8 All parts of the application (application, principal's/counselor's statement, teacher's statement, non-school endorsement, and official transcript) must be enclosed in one packet and must be returned to the Scholarship committee at the Grand Lodge office at 845 Wyatt Ave. P.O. Box 248, Lincoln, IL 62656-0248 (before the FEBRUARY 15th deadline), or emailed to glioof@ioof-il.org with Scholarship app for (list students name)" noted in the Scholarship line. Please allow ample mail delivery time! It is the responsibility of the applicant to consolidate all materials in one packet.
- 9. Applicant must be a resident of Illinois and a citizen of the United States. If applicant is a naturalized citizen, proof of citizenship must accompany application.
- 10. Only those chosen to receive awards will be notified by the end of June. Anyone wishing a list of recipients must enclose a self-addressed stamped envelope.
- 11. A copy of your most recent Federal 1040 income tax Forms for the supporting parents is required. Illinois State 1040 forms or W2's are NOT acceptable. Required pages are only the page showing adjusted gross income and dependants. This information is for verification purposes only. Failure to do so will disqualify your application. Please black out Social Security numbes. We need 1040 forms from Both Supporting Parents if they are divorced or separated.
- 12. You do not have to be an Odd Fellow or Rebekah member to complete this application. Only Odd Fellow and Rebekah members (self, or Supporting Parents, or Supporting Grandparents) must submit a Lodge Certification letter under the Seal of the Lodge. Failure to do so will lead to your application being disqualified.
- 13. The Application must be signed by parents and applicant. This application is strictly confidential. No financial information will be shared from your application. However, if your student is not chosen, it is acceptable to share the following information with lodges in your area that are giving scholarships from the local lodge. We will share your essay, the student's name and phone number, the parent's names, school information & phone number, the number of dependents, and the number of dependents currently in college. This will give your student a greater chance of receiving a scholarship from the local Odd Fellows and Rebekahs lodges.
- 14. The Illinois Odd Fellow Rebekah Scholarship Program will not discriminate against any individual on the basis of disability, age, ethnicity, gender, race, sexual orientation, religion or other social identity.







Lincoln, IL 62656

FOR CURRENT/RETURNING COLLEGE/VOCATIONAL SCHOOL STUDENTS RETURNING TO SCHOOL LATER IN LIFE. GENERAL INSTRUCTIONS

PLEASE FOLLOW DIRECTIONS CAREFULLY AND COMPLETELY. FAILURE TO DO SO WILL RESULT IN THE REJECTION OF THE APPLICATION.

- 1. Applicant must use the current official Odd Fellow-Rebekah scholarship form which must be dated and signed by the Student, parent(s), or guardian(s) and lodge official(s) where applicable. (see instruction 12) All applications and statements are required to be signed. Typewritten applications are preferred or must be legibly handwritten. A recent photograph of the applicant, with a signature on the reverse side, must be firmly attached to the application. If signatures are missing, the application will be rejected.
- 2. Applications and all supporting documents must be in English.
- 3. A current transcript, must be submitted. Records may be photocopies that bear an original signature or seal of the proper authority.
- 4. All applications must be properly bound on the left by a clear plastic report folder. Please do not staple.
- 5. The applicant shall prepare a statement **RESTRICTED to 150 words or less**, setting forth his/her vocational or professional goal. Relate how past, present, and future activities make the accomplishment of this goal probable. This must be <u>typed</u>, properly signed, and enclosed with all supporting materials. The application will be disqualified if the essay is not included and properly signed.
- 6. Current dated and signed recommendation, **RESTRICTED to 150 words or less**, from the two College Professors or Instructors in authority at the school the applicant is currently attending are required. Each recommendation must be enclosed in a sealed envelope, signed over the seal, and returned to the student for enclosure in the scholarship packet.
- 7. Include one letter of endorsement from a responsible community (NON-SCHOOL) person. **This person should not be related to the applicant,** but can be a businessperson, minister, religious official, or civic leader. The person should be capable of reporting the applicant's participation in the community in terms of work service, leadership, notable skills, and outstanding recognition. **Do not refer to high school accomplishments.** This should be enclosed in a sealed envelope, signed over the seal, and returned to the student for enclosure in the scholarship packet.







Lincoln, IL 62656

INSTRUCTIONS CONTINUED

All parts of the application (application, Professors or Instructors statement, teacher's statement, non-school endorsement, and official transcript) must be enclosed in one packet and must be returned to the Scholarship committee at the Grand Lodge office at 845 Wyatt Ave. P.O. Box 248, Lincoln, IL 62656-0248 (before the FEBRUARY 15th deadline), or emailed to glioof@ioof-il.org with subject: "Scholarship app for (list Students name) noted in the Subject line. Please allow ample time for mail delivery time! It is the responsibility of the applicant to consolidate all materials in one packet.

- 8. Applicant must be a resident of Illinois and a citizen of the United States. If the applicant is a naturalized citizen, proof of citizenship must accompany the application.
- 9. Only those chosen to receive awards will be notified by the end of June. Anyone wishing a list of recipients must enclose a self-addressed stamped envelope.
- 10. A copy of your most recent Federal 1040 tax Forms or from the supporting parents is required. Illinois State 1040 forms or W2's are NOT acceptable. Required pages are only the pages showing adjusted gross income and dependents. This information is for verification purposes only. Failure to do so will disqualify your application. Please black out Social Security numbers. We need 1040 forms from Both Supporting Parents if they are Divorced or Separated (if applicable).
- 11. You do not have to be an Odd Fellow or Rebekah member to complete this application. Only Odd Fellow and Rebekah members (self, or Supporting Parents, or Supporting Grandparents) must submit a Lodge Certification letter under the Seal of the Lodge. Failure to do so will lead to your application being disqualified.
- 12. The Application must be signed by supporting parents and the applicant. This application is strictly confidential. No financial information will be shared from your application. We will however if your student is not chosen, share the following information with lodges in your area that are giving scholarships from the local lodge. We will share your essay, the student's name and phone number, the parent's names, school information & phone number, the number of dependents, and the number of dependents currently in college. This will give you/your student a greater chance of receiving a scholarship from the Odd Fellows and Rebekahs local lodges.
- 13. The Illinois Odd Fellow Rebekah Scholarship Program will not discriminate against any individual on the basis of disability, age, ethnicity, gender, race, sexual orientation, religion or other social identity.







(217) 735-2561

Lincoln, IL 62656

Application of Required Facts

BASED ON FINANCIAL NEED AND SCHOLASTIC ABILITY

IMPORTANT: Before Instructions be carefull	ly studied and t	hen completely	executed.	•		
Name:			Phone ()	City	Address: State: 7	in:
	County:		1 none (<u>)</u>	DOB: Place of F	Statez Sirth	
	Age:		Sex:		(Yes/No) U.S. Ci	tizen
(Yes/No)	150		SCA	minors resident	(1 0 5/1(0)_0.5. e1	uzun
(Yes/No) Naturalized Citizen (Y	es/No)	(If ves. Ve	rification docu	mentation is required	1)	
Are you a member of t	he Independent	Order of Odd F	Fellows?	Rebekahs?	If so.	give 1
name and number of the	_					_
verification from the lo	-				(11111111	
, , , , , , , , , , , , , , , , , , , ,	, age zerreary,		20090)			
			CHOLASTIC			
Present educational lev	vel, (must be at	least a High Sch	nool Senior.)			
High School: Junior College: College/University:	Senior	G 1				
Junior College:	Freshman	Sophomore	T .	c ·		
College/University:	Freshman	Sopnomore	Junior	Senior		
Current School Name:			Address			
City.		State:	_Address		7in·	
Other:Current School Name: City:Please ensure a copy o your personal essay.	f your current s	chool grade tran	nscript is subm	itted to the Scholars	hip Committee. A	lso subm
	EXTR	A CURRICULA	R ACTIVITE	S (School Related)		
				ore space is needed.		
Honors and Awards (S	state year and n	ature of honor o	r award):			
Offices and positions of	of leadership (st	ate name of org	anization, posi	tion and year):		
Member of Organization	ons where no o	ffice held (state	name of Organ	nization and year):		
List Memberships/Invo	olvement in Co	mmunity Work	or Volunteer A	Activities:		
		J		Activity	Year	
,	-			•		
	-					

Illinois Odd Fellow-Rebekah Scholarship Award

FINANCIAL RESOURCES

Have you been granted scholarsh	ip aid?if so	give details:			-
Employment positions	Periods of em	ployment	Average time each v	veek	
(To be completed by parent(s)/s Applicants not dependents on p		nts who are deper	ndent on parent(s)/gua		for financial support)
Supporting Parent/Father (Guard		=			
	Name	Ag	e		Occupation
Address					-
Street	City	State		Zip	
Supporting Parent/Mother(Guardi	· ————————————————————————————————————				
Address_	Name	Age	Occupation		
Street	City	State		Zip	-
Father's present annual gross inco	ome \$	Mother's \$			
ATTACH COPY OF MO TO DEPEND	ANTS AND ADJUSTE	ED GROSS INCO	ME FOR VERIFICA		
Total number of dependents (<u>Do</u>					
Number of above dependents <u>pre</u>					
Are you (father/mother) members	_				_
number and location of the Lodge				lnc	lude a letter of
Certification under the seal of the	9				
Father's (Guardian's) present emp	·				
Mother's (Guardian's) present en Any further comments that you c single parent, financial situation,	are to make regarding y	our financial statu	s (i.e. prolong illness,		_
	If more space is no				
If you sign below you allow you under the age of 18. It also allow phone number, Parent's name Failure to sign this application w	r student's picture to be s us to share the follows s, School currently atto	placed in Local ning information w	ewspaper articles if the ith local lodges in your	area: Stu	dent's name and
Signed:	Signed:		Signed:		_
Father/Guardian		:/Guardian	Student		

Illinois Odd Fellow-Rebekah Scholarship Award

APPLICANT'S FINANCIAL RESOURCES

TO BE COMPLETED BY APPLICANTS WHO ARE NOT DEPENDENT ON PARENT(S)/GUARDIAN(S) FOR FINANCIAL SUPPORT.

	Have you been gran	ted scholarship aid	1?	_if so give details: _		
En	nployment positions	Periods	s of employn	nent Ave	rage time each we	ek
		APPLICANT'S I	FINANCIAL	, ANALYSIS		
Applicant	į					
	Nam	e	Age	Occupatio	n	
Address _	Street	City		State		 Lip
Spouse						<u> </u>
Address	Nam		Age	Occupatio	n	
Street		City		State	7	Zip
Applicant	's present annual gross	s income \$		Spouse \$		
	PAGES ONLY R	o not include yours	DEPEND VERIFIC elf)	ATION ONLY.		S INCOME FOR
	of above dependents <u>pr</u>	-	_		Dahakaha?	If so give name,
						If so give name, Include a letter of
	tion under the seal of	-				morado a letter or
	's present employmen	•			S	pouse's present
employm	ent				Any	further comments
that you c	are to make regarding	your financial stat	us (i.e. prolo	ng illness,		
single par	ent, financial situation	, etc)				
		If more space	ce is needed	use the back side of	this sheet.	
under the	e age of 18. It also allo	ws us to share the es, School curren	following in tly attending	formation with loca g, number of depe	l lodges in your a	win a scholarship and ar rea: Student's name an per currently in college
Signed:			Signed:_			Applicant
			Spouse			

<u>DISQUALIFIED IF NOT COMPLETED AND SIGNED</u> ALL FINANCIAL INFORMATION WILL BE KEPT STRICTLY CONFIDENTIAL

11/11/2025

ILLINOIS ODD FELLOW-REBEKAH SCHOLARSHIP AWARD Please use this form only. If additional space is needed use reverse side.

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IF POSSIBLE USE TYPEWRITEROR COMPUTERONLY.

PRINCIPAL'S/COUNSELOR/INSTRUCTOR STATEMENT

<u>PLEASE NOTE:</u> This statement must be **returned to the student <u>NO LATER</u>** <u>THAN FEBRUARY 15</u> enclosed in a sealed envelope with a signature across the seal, or emailed to <u>glioof@ioof-il.org</u> with subject Scholarship app for (list students name).

Co	oncerning:		Date:		
	Student's name				
1.	Is the applicant a student in good s	tanding? _			
2.	Date of his/her graduation.		_Current grad	de point Avera	ge
3.	For assistance of the Scholarship C system, if not clarified on the trans		please explai	n your present	grading
4.	In your opinion, what are the stude school of his/her choice? Excell		es of complet Good	ing college or s Fair	vocational Poor
5.	Please, RESTRICT your commended of this applicant for a scholar				
6.	PLEASE NOTE: An official copy sealed in the envelope with this sta		dent's transcr	ript is required	and can be
	Addı	ress:			

ILLINOIS ODD FELLOW-REBEKAH SCHOLARSHIP AWARD Please use this form only. If additional space is needed use reverse side. IF POSSIBLE, USE TYPEWRITER OR COMPUTER ONLY.

TEACHER/PROFESSOR/INSTRUCTOR STATEMENT

PLEASE NOTE: This statement must be returned to the student NO LATER THAN FEBRUARY 15 enclosed in a sealed envelope with a signature across the seal, or emailed to glioof@ioof-il.org with subject Scholarship app for (List Students name).					
Concern	ing: Date:				
	ing:Date:Date:				
1.	In your opinion to what extent do you consider this applicant a worthy candidate for a scholarship? Please RESTRICT your comments to 150 words or less.				
	Signed:				
	Title:				
	Address:				

ILLINOIS ODD FELLOW-REBEKAH SCHOLARSHIP AWARD

Please use this form only. If additional space is needed use reverse side.

IF POSSIBLE USE TYPEWRITEROR COMPUTERONLY.

NON-SCHOOL ENDORSEMENT STATEMENT

(This statement will be disqualified if completed by a school official or teacher. Please do not refer to academic or school-related activities.)

PLEASE NOTE: This statement must be returned to the student NO LATER THAN FEBRUARY 15 enclosed in a sealed envelope with a signature across the seal, or emailed to glioof@ioof-il.org with subject Scholarship app for (List Students name). This statement should attest to the student's participation in the community in terms of work, service, leadership, notable skills, and outstanding recognition. Concerning: _____ Date: _____ Student's name 1. In your opinion to what extent do you consider this applicant a worthy candidate for a scholarship? Please RESTRICT your comment to 150 words or less. Signed: Title: Address: