



Cinderella Chapter # 406 Order of Eastern Stars  
P. O. Box 1188  
Warner Robins, GA 31099

January 29, 2025

Greetings and congratulations 2025 High School Graduates! You have successfully reached a milestone in your life. Our local chapter will be awarding a limited number of scholarships this year.

Any interested senior attending Northside High School, Warner Robins High School, Houston County High School, or Veterans High School may apply by submitting a completed application. All applications must be post marked and reach the above address on or before March 31, 2025 to be considered for the scholarship. ALL applications submitted must include your GPA AND your counselor's signature.

Additional information needed may be obtained by contacting a member of the Scholarship Committee: Rosemary Rodgers (478-607-0392) or Ingrid Verdell, 478-918-5466.

Sincerely,

Betty Riley

President, Cinderella Chapter #406



# Application Guidelines

## **Eligibility:**

- *Submit a completed application*
- *Print neatly in blue or black ink only*
- *Please use the application provided. Do not retype the application. If you need additional space, use a separate sheet of paper.*
- *Be a high school senior*
- *Have a GPA of 2.5 or above*
- *Please remember that your current GPA **must be written and signed off by your counselor.** If not, your application will be considered incomplete.*
- *All applications must be received **on or before March 31, 2025** at the address listed below:*

*Cinderella Chapter #406  
Order of Eastern Stars  
P. O. Box 1188  
Warner Robins, GA 31099*

## **Selection Process:**

- *Applicants will be notified and determined by the Cinderella Scholarship Committee*



*Cinderella Chapter #406  
Order of the Eastern Stars  
2025 Scholarship Application*



Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

High School \_\_\_\_\_ Graduation Date: \_\_\_\_\_ **GPA\*** \_\_\_\_\_

Counselor's Name\* \_\_\_\_\_ Counselor's Signature\* \_\_\_\_\_

**(Application will be considered INCOMPLETE without the \*required information)**

Father's Name \_\_\_\_\_

Name of Lodge (if applicable) \_\_\_\_\_

Mother's Name \_\_\_\_\_

Name of Chapter (if applicable) \_\_\_\_\_

List ALL extracurricular activities that you are involved in \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Awards/Recognitions Received \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Church Affiliation (if any) \_\_\_\_\_

Community Involvement (i.e. volunteer work) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College/Vocational School Planning to Attend \_\_\_\_\_

Anticipated Major \_\_\_\_\_

Please provide in 250 - 500 words what and/or who influenced your choice of profession. Also, briefly discuss how this scholarship can assist you in reaching your educational goal.