Odd Fellows and Rebekahs Association of Western Pennsylvania 2025 Graduate Scholarship Award Application

Idd1033.			
mail Address:		Social Security # (last 4	digits):
elephone: Home:	School:	Cell:	
OOF or Rebekah Member: If Yes: Lodge Name:	Yes / No		Lodge #:
Address:			2
amily Relative IOOF or Reb	ekah Member: Yes / No		
f Yes: Name		Relationship),
Address			
Telephone: Home: Lodge Name:		Cell:	Lodge #:
Family History: Father's Na	ame:		
Add	ress:	(
Occ	upation:		
Tele	phone: Home	Cell	
Mother's N	lame:		
Ado	lress:		
Осс	upation:		
Tele	ephone: Home	Cell:	
List: A. Community Service	e(s):		
		7 -	
7.			
B. Church Related Par	ticipation:		
D. Charch Related Far		X	

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Major or Ar	ea of Concentration:	
Student Acco	ounts/ Bursar's Office Address:	
		,
	<u> </u>	
	Telephone #:	
Student ID	#:	
Year of Coll	ege/University Graduation (und	dergraduate):
Number of	f Graduate Credits Completed:	
Number of	Graduate Credits Remaining:	
Number of	Graduate Credits Presently Tak	ing: Next term:
ist two (2) recommendations (not relative	es) with address and phone nun	mber included. (Don't forget to
submit each recommendation.) Name	Address	Phone #
vaine		.)
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	certify that the information prov	vided is complete and accurate.
To the best of knowledge, I would like to o		Date:
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Charleroi, PA 15022-3331