

**Academy of Masonic Knowledge
Masonic Scholar Certification Program**

Evaluation Report Cover Sheet

Name: _____

Address: _____

Certification for Level:

_____ Masonic Scholar -Level One

_____ Masonic Scholar - Level Two

_____ Master Masonic Scholar - Level Three

Evaluation of: (book, presentation, seminar, etc.) _____

Title: _____

Author: _____

I hereby submit the following Evaluation Report, which I certify, is the product of my own work.

Signature: _____ Date: _____

A cover sheet in this format must accompany each Evaluation Report. The report should be mailed to:

William R. Rininger
1120 Karen Street
Boalsburg, PA 16827-1642

***** Do Not Write Below This Line – For Office Use Only *****

Evaluation Report _____ **Approved** _____ **Not Approved**

Date: _____ By: _____

Participant notified – Date: _____ By: _____