

Wyoming Elks Association

Major Project and George B. Klein Memorial Scholarship

Application Guidelines

Official Application Form

Application must be filed with the Elks Lodge of Jurisdiction on or
before **March 1st of GRADUATION YEAR**

Name _____
First Middle Last

Present Address _____ Permanent Address (Same _____)

Street or PO Box _____ Street or PO Box _____

City – State – Zip _____ City – State – Zip _____

Phone Home: _____ Cell: _____

Your Age _____ Date of Birth _____

Father / Step Father _____
Name Date of Birth

Telephone H: _____ C: _____ W: _____

Mother/Step Mother _____
Name Date of Birth

Telephone H: _____ C: _____ W: _____

The Wyoming Elks Association Major Project and George B. Klein Memorial Scholarship Awards are awarded upon the basis of good morals and character, scholarship achievement and financial need. Read this form carefully so that you understand what is required. Thoroughness in providing your information is essential in the evaluation of your application. **All information will be kept confidential.**

High School Information:

- (a) A copy of certified Transcript(s) is required
- (b) ACT / SAT Score
- (c) Name and Address of High School

MUST HAVE LOCAL LODGE ENDORSEMENT TO BE CONSIDERED FOR JUDGING

The Scholarship Chairman, Exalted Ruler or Lodge Secretary of the Lodge, with jurisdiction in which the applicant is a resident, must sign the Lodge Endorsement. Applications should not be endorsed if there is doubt as to the accuracy and/or validity of the information included.

Signed _____ Date _____
Lodge Scholarship Chair, Exalted Ruler or Lodge Secretary

Lodge Name _____ Number _____

LODGE PERSONNEL – Forward Applications to the State Scholarship Judging Committee, no later than March 15th, at the address provided. **DO NOT SUBMIT TO WYOMING STATE ELKS ASSOCIATION.**

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From your daily classroom work or your extra-curricular activities in or out of school, what were the accomplishments in which you took pride? Please explain. *(This might be a research paper, a project, or an area in which you accepted special responsibility)*

Name courses from your high school years which you feel have best prepared you for college or your chosen major and why:

Is there anything else you would like the Selection Committee to know that might aid the consideration of your application?

Financial Affidavit

Please provide the following financial information. All information will be kept confidential. Incomplete information may result in points being lost by the applicant.

Statement of Assets and Liabilities as of: (date) _____

Father / Stepfather Name:	Employer	Annual salary \$	(A)
Mother / Stepmother Name:	Employer	Annual salary \$	(B)
Applicant's:	Employer	Annual salary \$	(C)
Applicant's Spouse Name:	Employer	Annual salary \$	(D)
Income from Social Security/Disability Benefits, Child Support, rent free Housing, other, etc.		\$	(E)
GROSS INCOME (Total of A,B,C,D & E)		\$	(F)

Present Market Value of Owned / Mortgaged Home	\$	(G)
Amount of Unpaid Mortgage	\$	(H)
Home Equity (G minus H)	\$	(I)
Present Market Value of Farm, Ranch, Rental Property and / or Business owned by Parents / Stepparents	\$	(J)
Amount of Unpaid Mortgage (on business capital assets)	\$	(K)
Equity of Business Capital Assets(J minus K)	\$	(L)
Value of Bank Accounts, Checking and Savings	\$	(M)
Value of Investments, CD's, Stocks, Bonds, etc.	\$	(N)
Present Value of Autos, Trucks, Boats, etc. Less unpaid Loans / Mortgages	Net \$	(O)
TOTAL VALUE OF ASSETS (Total of I,J,K,L,M,N, & O)	\$	(P)

Total on Notes payable (not included above)	\$	(Q)
Unpaid Medical and Dental Expenses	\$	(R)
Total of Other Debts (Credit Cards, etc.)	\$	(S)
Total Liabilities (Total of Q, R, & S)	\$	(T)
NET WORTH (P minus T)	\$	(X)

I, _____ being duly sworn under oath, do hereby swear that to the best of my knowledge, the above statements and figures are true and correct.

Signature _____ Date _____
(Father, Mother, Stepfather,
Stepmother or Guardian – circle one)

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Major Project and George B. Klein Memorial Scholarship

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Major Project Scholarships are limited to full-time students attending any accredited College, University, or Vocational School in the United States. **George B. Klein Memorial Scholarships** are limited to full-time students attending any accredited College, University, or Vocational School in the Wyoming.

Institution you plan to attend:	Location:
Beginning Month:	
Field of Study / Major:	
Why are you interested in this field?	

ANNUAL COST OF ATTENDING THE INSTITUTION YOU HAVE CHOSEN:

Tuition	\$
Books and Fees	\$
Room and Board	\$
Transportation	\$
TOTAL	\$

Number of dependents claimed on your parents income tax return	
Are any of these siblings also attending college? (circle one)	Yes No
If yes, where:	
Parent/Step Parent monthly rent or mortgage payment:	\$
If married, your monthly rent or mortgage payment:	\$

All the information above, including attachments, constitutes my application for the Major Project and George B. Klein Memorial Scholarship, and is true and correct to the best of my knowledge and belief. If awarded the scholarship, I agree to abide by all of its requirements. As the applicant, I understand that all information furnished to the Selection Committee shall be confidential.

Applicant Signature: _____ Date _____

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Counselor Report

Applicant: Fill out your name and give this page to your Counselor/Advisor. This section should be returned to you for inclusion with your application in a sealed envelope. It may be contained within the same sealed envelope with your Transcript & ACT/SAT scores.

Student Name: _____
Last First Middle Initial

Counselor: This form will be used to verify the student's academic status. If your school has a policy of not ranking students, provide information to help us identify promising applicants. Please secure this and the copy or the Student Transcript & ACT/SAT (include your personal letter of recommendation if you wish) in a sealed envelope, signed across the seal, and returned to the student for inclusion in the scholarship application.

Applicant's grade point average: _____ (required)

Highest GPA in the Graduating class? _____

Is the GPA based on weighted grades? yes _____ no _____

Class rank: The applicant ranks _____ in a class of _____

Is the class rank based on weighted grades? yes _____ no _____

Applicant's highest composite scores (if not included with transcript) SAT _____ ACT _____

How would you describe this applicant's academic program?

Below Average ___ Average ___ Above Average ___ Rigorous ___ Most Rigorous ___

Counselor's/Advisor's comments: (If more room is required, please attach sheet(s) with this report).

Name (please print) _____ Position _____

Length of time associated/acquainted with applicant _____

Signature _____ Date _____