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 C:		Date of Birth W:
Mother/Step Mother			
	NameC:		Date of Birth W:

The Wyoming Elks Association Vocational Grant 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. <u>All information</u> will be kept confidential.

High School Information:

- (a) <u>A copy of certified Transcript(s) is required</u>
- (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_

Lodge Scholarship Chair, Exalted Ruler or Lodge Secretary

Lodge Name_

LODGE PERSONNEL – Forward Applications to the State Scholarship Judging Committee, no later than March 15th, at the address provided.

Date

Number ____

High School Activities: List all activities including clubs, athletics, and youth groups. Indicate leadership positions held and years participated (with x.) Include additional pages if not enough rows are provided.

Examples: Sports teams, Drama, Speech and Debate, Band, Choir, Service Orgs, National Honor Society, Student Government, Yearbook, Newspaper, JROTC, etc.

Activities	Leadership Positions	Fresh	Soph	Jr	Sr

Employment: List jobs held during grades 9 through 12. List average hours per week worked during summer months and average hours per week during the school year.

Employer	Type of work	Hrs/Wk Summer	Hrs / Wk School Year	Date Start and End

Volunteer Work and Community Groups: List volunteer work and participation in community groups performed while in grades 9 through 12. List average hours per week worked during summer months and average hours per week worked during the school year.

Type of Volunteer or Community Work	Hrs/Wk Summer	Hrs / Wk School Year	Date Start and End

List **ALL** honors, prizes or special recognitions you have received during grades 9 through 12, with dates awarded. These may be school and non-school activities. Be sure to include any academic honors. It is important that you respond freely and completely. Attach extra sheet and label **HONORS** if more space is needed.

Honor/Award/Prize/Recognition	Date Awarded	Year in HS

From your daily classroom we	rk or your extra-curricular activities in or out of school, what influenced you to seek a career in a
vocational or technical field?	Please explain.

How do you feel a career in a vocational or technical field will impact your future?

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	f 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/Disabilitetc.	ty Benefits, Child Support, rent free Housing, other,	\$	(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)

Vocational Grants are limited to students attending a two year or less vocational / technical program, culminating in an associate degree, diploma or certificate, but less than a baccalaureate program (Bachelor's Degree.)

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	\$
Other (tools/equipment, etc.)	\$
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 Vocational Grant 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
provide information to help	us identify promising applicate of recommendation if you we	nts. Please secure this and th	ar school has a policy of not ranking students, ne copy or the Student Transcript & ACT/SAT ned across the seal, and returned to the student
Applicant's grade point	average:	(required)	
Highest GPA in the Gr	aduating class?		
Is the GPA based on w	eighted grades? yes	fio	
Class rank: The applica	int ranks in a class	of	
Is the class rank based o	on weighted grades? yes	no	
Applicant's highest con	aposite scores (if not include	ed with transcript) SAT	ACT
	ee this applicant's academ erage Above Average		st Rigorous
Counselor's/Advisor'	s comments: (If more room	is required, please attach sheet(s	s) with this report).
Name (please print)		Position	1
Length of time associat	ed/acquainted with appli	cant	
Signature		Da	te