

**NEBRASKA ELKS ASSOCIATION
VOCATIONAL SCHOLARSHIP APPLICATION**

Name _____ Social Security # _____

Street Address _____ Phone () _____

City/State/Zip _____

Date of Birth _____ Place of Birth _____ Age _____ Sex _____
City/State

Citizenship USA YES NO (Applicant must be a citizen on the date this is signed. If not born an American citizen, give date and place of Naturalization.)

Date _____ Place _____ # _____
City/State

Name of High School Attending _____

Address _____ Year of H.S. Graduation _____

Grade Point Average _____ Class Rank _____

I certify that the statements contained in this application are true.

Signature of Student Date: _____

The Scholarship Chairman or Exalted Ruler or Secretary of the Nebraska B. P. O. Elks Lodge, in the jurisdiction where the applicant is resident, must sign the Lodge endorsement certifying that the application has been reviewed. Applications should not be endorsed if they do not essentially conform to the requirements outlined in this application of required facts.

This application, with attached exhibits, has been reviewed and conforms to the rules and regulations set forth by the Nebraska Elks Association.

Lodge Name _____ No. _____

Date _____ Signed _____
Lodge Scholarship Chairman or Exalted Ruler or Secretary

College or Vocational School planning to attend _____
FULL NAME - NOT Initials

Address _____
Street Address City/State/Zip

First Year - Date course will begin _____ Date course will end _____

Second Year - Date course will begin _____ Date course will end _____

Vocational Goal (Give name of course of study) _____

At completion of this course, I will receive a Certificate ___ Diploma ___ or an _____ Degree
(type of degree)

Do you plan to continue on to a 4 year degree? Yes ___ No ___ Undecided _____

Employment record (employer, address, dates of employment, person to contact about employment)

Honors & Awards - Non-school related (civic) _____

Office or positions held (Organization, position, year) _____

Other Activities (School or Civic) _____

TO BE COMPLETED BY ALL APPLICANTS

Budget for one full Academic Year

This grant can be used only to cover the items in A-B & C below. It may not be used for general living expenses such as apartment rent, mortgage payments, automobile expenses for use or maintenance of a car. It may not be used for child care costs. Incomplete or unnecessary information in this section can not be evaluated.

A. Tuition and Fees (full academic year, not monthly).....\$ _____

B. Books and Supplies..... _____

C. Room and Board (only if living on campus)..... _____

D. Total of above - Add lines A,B & C.....\$ _____

LESS ANTICIPATED AMOUNTS AVAILABLE FOR EDUCATION (income)

E. Parent(s) Contribution.....\$ _____

F. Student's Contribution..... _____

G. Summer earnings..... _____

H. College Work/Study Employment..... _____

I. Other Scholarships, Grants or Loans (List name and amounts in detail)

..... _____

..... _____

J. Total of above- Add lines E,F,G,H & I.....\$ _____

Amount needed to balance school budget for one year

Subtract Line J from Line D \$ _____

This is an assistance grant and not intended to cover the full cost of your education. It is the responsibility of the student to also seek assistance from other sources and to demonstrate that the amount not covered by this grant can be obtained through personal or parental contribution or through other sources of assistance programs.

To properly evaluate this application, the information on these 2 pages is essential. Choose the area which best fits the applicant's circumstances. A dependent applicant is one who relies on his/her parents for the basic and major portion of his/her support. An independent applicant is one on his/her own and derives the basic and major portion of his/her support from himself/herself and/or a spouse. Incomplete information in this area will disqualify the applicant.

TO BE COMPUTED BY UNMARRIED APPLICANT DEPENDENT ON PARENTS

Father's name _____ Age _____ Occupation _____

Mother's name _____ Age _____ Occupation _____

Parent's marital status - Mother: Married _____ Widowed _____ Divorced _____ Remarried _____

Father: Married _____ Widowed _____ Divorced _____ Remarried _____

Father's annual income before taxes.....\$ _____

Mother's annual income before taxes..... _____

Applicant's annual income before taxes..... _____

All other taxable or non-taxable income not included above (include pensions, Social Security, Disability, interest, etc. - explain source)

GROSS INCOME (total of above.....\$ _____

Number of Dependents (Exclude mother & father)..... _____

Number of Dependents currently attending college..... _____

Current year Medical & Dental expenses not paid by insurance..... _____

Emergency expenses (flood damage, etc.)..... _____

Total market value of home \$ _____ Amount of unpaid mortgage..... _____

If no home owned, amount of annual rent..... _____

Do you own a farm or business Yes ___ No ___ if Yes, what is market value... _____

What is the net profit?..... _____

Value of bank accounts..... _____

Value of other investments (CD's, stocks, bonds, etc - explain source)

Any unusual circumstances, please explain _____

Does Mother or Father have a pension plan other than Social Security? Yes ___ No ___

TO BE COMPLETED BY MARRIED OR INDEPENDENT STUDENT:

Applicant's marital status - Single _____ Married _____

Spouse's name _____ Age _____ Occupation _____

Applicant's annual income before taxes.....\$ _____

Spouse's annual income before taxes..... _____

All other taxable or non-taxable income not included above (including Social Security, disability, interest, dividends, etc - explain source _____)

GROSS INCOME (total of all above)..... _____

Number of Dependents (excluding applicant and spouse)..... _____

Spouse attending school Yes _____ No _____

Number of other Dependents attending school/College..... _____

Current year Medical and Dental expenses not paid by insurance.....\$ _____

Emergency expenses (Detail) _____

Total market value of home \$ _____ Amount of unpaid mortgage.. _____

If no home is owned, amount of annual rent..... _____

Do you own a farm or business Yes ___ No ___ If so, what is market value _____

What is the net profit..... _____

Value of bank accounts..... _____

Value of other investments (CD's, stocks, bonds, etc. - explain sources:)

Any unusual circumstances, please explain _____
