

**NEBRASKA ELKS ASSOCIATION  
PAST EXALTED RULER'S SCHOLARSHIP APPLICATION**

Applicant's Name \_\_\_\_\_ Age \_\_\_\_\_ Social Sec No. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Father's Name \_\_\_\_\_ Address \_\_\_\_\_

Mother's Name \_\_\_\_\_ Address \_\_\_\_\_

Are your parents both living? \_\_\_\_\_ How many brothers and sisters do you have? \_\_\_\_\_

What is your Father's occupation? \_\_\_\_\_ Mother's occupation? \_\_\_\_\_

Have you any funds to start your college education? \_\_\_\_\_ If so, how much? \_\_\_\_\_

How do you expect to finance your college education? \_\_\_\_\_

What is your vocational goal? \_\_\_\_\_

What extra-curricular activities did you participate in while at school? \_\_\_\_\_ (Attach list and years of participation)

Have you ever held a job? \_\_\_\_\_ What did you do? \_\_\_\_\_

Submit **three** letters of recommendation from any of the following: Principal, Pastor of Church, present instructor, local business person, or employer; a copy of ACT or SAT test scores and a certified copy of your High School Transcript Record.

**PARENT'S FINANCIAL STATUS**

Adjusted gross income per Federal Income Tax return of the last filing year \$ \_\_\_\_\_

Number of dependent's \_\_\_\_\_ Number of dependents **currently** attending college \_\_\_\_\_

Medical, dental & emergency cost this past year not covered by insurance \$ \_\_\_\_\_

Total market value of home \$ \_\_\_\_\_ Amount of mortgage \$ \_\_\_\_\_

Total market value of farm or business \$ \_\_\_\_\_ Amount of mortgage \$ \_\_\_\_\_

What was your net profit? \_\_\_\_\_ Value of bank accounts and other investments? \_\_\_\_\_

Date \_\_\_\_\_ Father's Signature \_\_\_\_\_ Mother's Signature \_\_\_\_\_

**APPLICANT'S AGREEMENT** - I understand that each question on this form is for a purpose, and it will not suffice to submit an incomplete application. **ALL** information on this application is to be used solely by the Nebraska Elks Association for the purpose of this application.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Exalted Ruler's signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Lodge Name \_\_\_\_\_ Lodge No. \_\_\_\_\_