

Scholarship, Leadership & Community Service

PERSONAL INFORMATION

Name			
Name	FIRST		MIDDLE INITIAL
Mailing Address			
City	S	tate	Zip
Email address (required)			
Phone ()		Male	Female
Date of Birth///	Place of Birth	CITY, STA	TE or COUNTY
Name of High School			
Location of High School			
	CITY, STA	TE or COUNTY	
	A ELKS LODGE AS		
Circle which one applies and	d enter name of ELK Parent	t / Grandpaı	ent / Legal Guardia
LAST	FIRST		MIDDLE INITIAL
Membership Number of ELK			
By signing this application, I Lodge No. 1015, and will ren			
SIGNATURE of PAREN	T / GRANDPARENT / LEGAL GUARD	IAN (Circle whic	h one applies)
	CITIZENSHIP		
Are you currently an Americ	an Citizen? Yes No _	If no,	see below.
NOTE: (Legal permanent recitizen on the date the applic	-	ualify. App	licant MUST be a
If you were NOT born an Amplace (Office or Court where			
Date///			
PlaceCOURT or OFFICE		Number	

Page 2

Scholarship, Leadership & Community Service

HONORS and AWARDS

List scholastic, extracurricular and civic honors and awards received during grades 9 through 12. Give the year received (9, 10, 11, 12), state the nature of the award: i.e.: Girl Scout Award, and give the level of recognition (school, state, regional, national, international). **Please do not abbreviate names of the awards**, as we may not understand their meanings. Include a brief description of each award on a separate piece of paper. Feel free to explain, in 25 words or less, the purpose of the award and why you received it. Complete this section first. If you need to attach an additional sheet or resume, please do so.

1			
2			
3			
4			
5			
C	OMMUNITY S	SERVICE	
List community service you p starting with the most recent this section. <u>List approxima</u> points in this section if you do you plan to attach an activity s	. If necessary, attach a te total hours, not ave not list your hours as	a separate sheet structure <u>rage hours per week.</u> <mark>Yo</mark> u	d identically to will receive 0
Specific Nature of Service	Organization	Dates of Service	Total Hours
	Grand	I Total of Hours of Service	

Application Deadline: April 1, 2017

Page 3

Scholarship, Leadership & Community Service

LEADERSHIP and EXTRACURRICULAR ACTIVITIES

List your **principal** leadership roles and extracurricular activities, in the order of importance to you. State the name of the organization, grades involved (9, 10, 11, 12), hours-per-week, weeks -per-year. Describe the commitment, leadership role and responsibilities held in that role. Examples include, but are not limited to, student government, publications, debate, orchestral band, varsity athletics, church groups, performing arts, service programs, etc. Complete this section even if you plan to attach an activity sheet or resume.

GRADE LEVEL	ACTIVITY	HRS/WK	WKS/YR	POSITIONS HELD / HO LETTERS EA	
		WORK EX	PERIE	ENCE	
most rec paid. If approxim	ent and include w necessary, attac nate total hours we	ork on a family farr ch a separate shee	n or for a et structu	d December 31, 2016 family business, even red identically to this week. Complete this	if you were not s section. <u>List</u>
Specific	Nature of Work	Employer	Dat	tes of Employment	Total Hours

Application Deadline: April 1, 2017

Page 4

Scholarship, Leadership & Community Service

ESSAY

In the space provided below (and on a separate sheet of paper if necessary), you must prepare a typed essay of no more than 500 words on one the following topics. The essay must be dated and signed. Failure to do so will result in 0 points for this section.

OPTION 1: "What is/was your favorite class in high school, and why?"

OPTION 2: "Explain how your community service might help you to attain your life goals."



Page 5

Scholarship, Leadership & Community Service

COUNSELOR REPORT

Applicant: Fill out your name below, then give this page to your counselor or other appropriate school official. The counselor should then return this page along with the other requested materials to you in a sealed envelope signed across the seal. You should then return this envelope with your other application materials.

Student Name		
LAST	FIRST	MIDDLE INITIAL
Counselor: Please provide an official copy of the student test scores are submitted via their inclusion on the transdemographics and course offerings. We also request the addressed on the transcript or other submitted report SIGNED ACROSS THE SEAL, AND RETURN TO THE STITLE B.P.O. ELKS WILL NOT RETURN THIS FORM TO THE	cript. Also include a school pr hat you answer the questions PLEASE SECURE THESE IT UDENT FOR INCLUSION IN TI	ofile that describes the school's below to the extent they are no FEMS IN A SEALED ENVELOPI
This applicant's grade point average (A=4.0)		(required)
The highest GPA in the graduating class?		(required)
Is the GPA based on weighted grades? Yes	No	
Class Rank: in a class of		
How many students have this rank?		
How many above this rank? Is the rank pa	assed on weighted grades?	Yes No
If exact rank is not available, indicate to the neares	st 10th from the top:	·
Applicant's HIGHEST test scores (required).		
ACT Date taken /	<u> </u>	
MO YR		
SAT Critical Reading Date taken _	1	
	MO YR	
SAT Math Date taken /		
Are HONORS courses available? Yes No		
Has the applicant taken honors courses? Yes	No If yes, in which	subjects has the applicant
taken honors courses?		
Are Advance Placement courses available? Yes _ applicant taken Advanced Placement courses?	_	-
Is there a community service requirement to gradu	uate? Yes No If ye	es, how many hours?
Has the applicant ever been suspended or dismiss	ed from school? Yes I	No If yes, please attach
the explanation on a separate sheet of paper to the	e page.	
Name (please print)		ition
FIRST	LAST	
School phone number ()	School email	
Signature	Date	9