

Mountain Home Lodge B.P.O.E No. 1714

P.O. Box 96 Mountain Home, Arkansas 72654-0096 A Fraternal Organization

ELKS SCHOLARSHIP APPLICATION

Last Name of Applicant	First Name	Middle Initial	Date
Last Name of Applicant	1 list i valle		
Address (Street, City, State, Zip))		
Email address	Home Phone	Cell Pl	none
Parents' Name and Address			
Highest Test Score: ACT	SAT	7 Sem	ester GPA
High School Attended	Nur	nber in class	Your rank
Future Plans: Institution	Area	a of specialization_	
Please attach a TRANSCRIPT	and TEST SCORES	from your high scho	pol.
Father's (stepfather's, guardian's) occupation		
Mother's (stepmother's, guardian	n's) occupation		
# of dependent children(includin	ng applicant)	# of children in col	llege next year
Extenuating circumstances (atta	ch separate sheet if ap	plicable)	
Parent's Adjusted Gross Income	from last year's tax re	turnan	d/or this year's

Honors or awards received. Attach additional sheet if necessary.

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Student and community leadership positions. Attach additional sheet if necessary.	

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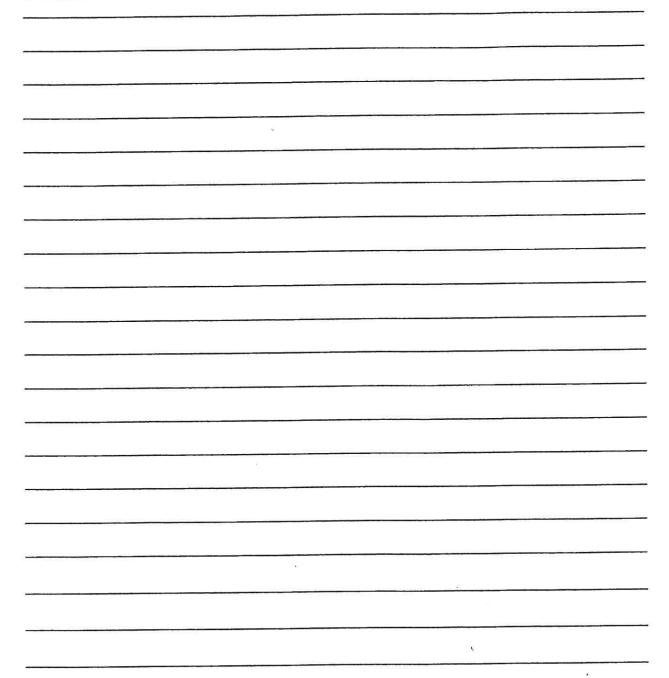
Other student and community activities. Attach additional sheet if necessary.

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In the space below, please tell us a little about your future plans and why you are seeking and deserving of financial aid. Feel free to attach any documents you feel would be of assistance to our selection committee.



I understand all entries are strictly confidential and become the property of Mountain Home Elks Lodge #1714 and will not be returned. I certify to the best of my knowledge, all answers and statements are correct.

Date_____

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Signature of applicant_____

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