

Memorial Scholarship Application

Littleton #1650 Scholarship/Charity Fund, Inc.

Qualifications

Check to see that you meet the qualifications:

US citizen on the date the application is signed. Resident Alien status does NOT qualify.

High school senior status on application deadline date.

Independent Student

We will not accept an applicant as an independent student, unless the student is or has been a ward of the Court. We require a copy of a Court Document or a Notarized letter from an appropriate Court Agency (Social Services) certifying to such status.

Instructions

IMPORTANT: Application must be submitted on or before January 15, 2024 to:

Littleton #1650 Scholarship/Charity Fund, Inc. Memorial Scholarship Application, Attn: Scholarship Committee 5749 South Curtice Street Littleton, CO 80120

The official Memorial Scholarship Application must be completed in its entirety with signatures of applicant, parent/guardian/counselor, where designated. Incomplete section will not be considered in the scoring.

After completing this application, make a photocopy for your records. All applications become the property of the Little ton #1650 Scholarship/Charity Fund, Inc. and will not be returned to the applicant. Typewritten applications are preferred; however, neatly printed applications are acceptable. Applications and all supporting documents must be in English.

Please arrange the completed packet for presentation to Elks Scholarship Committee as follows:

1. Please place pages in the order sequence according to the Applicant Checklist.

2. Place all pages in a folder or clipped together. Please make sure the information can easily be read by judges.

The scholarships are awarded based on: Financial Need, Academics, Leadership, and Community Commitment

All scholarships are awarded by the Littleton #1650 Scholarship/Charity Fund, Inc., committee conditioned upon the enrollment of the student in an undergraduate four-year degree program in an accredited US American college or university. Upon receipt of the "Verification of Enrollment", a check for the amount of the award will be sent directly to the school establishing a credit in the student's name.

Important: ALL items must be included in packet at time of submission.							
Applicant Checklist, please arrange packet in this order:							
 1. Completed Application (original, typed or neatly printed) 2. Counselor Report (in sealed envelope) 3. Reference Letter # 1 & # 2 4. Thoughts about College Future 5. Applicant Essay 	 6. Employment / Community Service 7. Extracurricular Activities / Honors/Awards 8. Parental Financial Analysis, both pages 9. <u>Items neatly contained in a</u> <u>presentation folder</u> 10. Application submitted by DUE DATE 						

Resident of Littleton, Colorado or a surrounding local area without an Elks Lodge.



Memorial Scholarship Application

Littleton #1650 Scholarship/Charity Fund, Inc.

Date	Phone	
Name		
Last	First	Middle Initial
Street Address		
City, State, Zip_		
Email		
Date of Birth M	/ Place of Birth onth Day Year City & State or City & Country	
Are you an Ame	erican Citizen by birth?	ion Number.
Date	Place Court or Office and City & State	
	court or Office and City & State ow you heard about Littleton Elks Lodge #1650 Scholarship and what mo	
 Provide Allow u advertis 	application, you agree to: additional information, if requested, that will verify the accuracy of the ap se of your name, and any information contained within the application, ex sing, promotional, and publicity purposes without compensation. misleading information is identified; the applicant will be disqualified from	cept financial, for
Date	Student signature	
Date	Parent/Guardian signature	
Date	Parent/Guardian signature	
For use by Littlet	on #1650 Scholarship/Charity Fund Committee:	
Date Received _	Application received by DUE DATE and cor	nplete
	 1. Completed Application (original, typed or neatly printed) 2. Counselor Report (in sealed envelope) 3. Reference Letter # 1 & # 2 4. Thoughts about College Future 5. Applicant Essay, attached 6. Employment Community Service 7. Extracurricular Activities Honors/Awards 8. Parental Financial Analysis, both pages 9. <u>Items neatly contained in a presentation folder</u> 	



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Counselor Report

Ар	plicant: Fill in your name and give it to your	r counselor or appropriate school official	to complete.		
Stu	udent Name Last	First			Middle Initial
Co	unselor: Please include a copy of your sch	ool profile and answer the following ques	tions.		
1.	This applicant's grade point average (A=4	4.0) is the GPA based on weig	hted grades?	□ Yes	□ No
2.	Has this student any of the following:	□ International Baccalaureate (IB)	□ Advanced Pla	acement (AP)	
	Concurrent enrollment (college class)	□ Gifted and Talented (GT)	□ Honors (H)	□ Other	
lf c	ther, please explain?				
3.	How rigorous are this applicant's academ	ic choices while applying for this scholars □ Average □ Above Average □ Rigo	•	orous	
4.	Is there a community service requirement	t to graduate?	how many hours?		
	ecommend this applicant for the Littleton ease explain.	-			
Wł	nat additional information would you like	to share for the committee to conside	r that makes this s	student extra	ordinary?
	ease secure the following items in a seale ident to include in their application pack		s the flap of the er	nvelope and r	eturn it to the
	□ Completed C	ounselor Report (this form)	Official Transcrip	ot	
Lei	ngth of time acquainted with applicant	School email			
Pri	nt Name	Position			
Sig	jnature	Date	School Phone		



Reference Letter # 1

Applicant: Fill in your name and give it to someone whom you would like as a reference. A reference may be any of the following: clergy, neighbor, community service supervisor, employment supervisor, a member of the Elks Lodge (in good standing), coach, teacher, and/or school administrator.

Student	Name			
	Last		First	Middle Initial
Note: I	Please do not include inform	nation that may be private or co	nfidential in nature that sh	ould not be shared.
Please a	answer the following questions	i.		
1.	How long have you known th	ne applicant?		
2.	In what capacity are you acc	uainted with the applicant?		
3.	Please give details of the ap	plicant's strengths and attributes c	of character?	
4.	What additional information	would you like to share for the con	nmittee to consider that mak	es this student extra ordinary?
Please co	ntinue on the back of page, as needed	d.		
Print Na	me			Phone
Email				
Signatur	e			Date



Reference Letter # 2

Applicant: Fill in your name and give it to someone whom you would like as a reference. A reference may be any of the following: clergy, neighbor, community service supervisor, employment supervisor, a member of the Elks Lodge (in good standing), coach, teacher, and/or school administrator.

Student	Name			
	Last		First	Middle Initial
Note: I	Please do not include inf	ormation that may be private or co	nfidential in nature that s	hould not be shared.
Please a	answer the following quest	ions.		
1.	How long have you know	vn the applicant?		
2.	In what capacity are you	acquainted with the applicant?		
3.	Please give details of the	e applicant's strengths and attributes	of character?	
4.	What additional informat	ion would you like to share for the co	mmittee to consider that ma	kes this student extra ordinary?
Please co	ntinue on the back of page, as ne	eded.		
Print Na	me			Phone
Email				
				Date



Thoughts About College Future

What is your vision for your education? What influenced you to choose this path?

Applicant Essay

On a separate attachment, please write a <u>detailed</u> essay of <u>750 words</u> on the following topic:

Change is inevitable; you have lived through COVID/isolation and now a down turn in our economy. How do you see yourself finding your place in life and succeeding in current and future change in our society?

The essay must be signed and dated.



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Employment

List jobs you have held over **the past three years** for which you were paid, starting with the most recent first. Please include babysitting or work in a family business, even if not paid. <u>Please list approximate total hours worked</u>.

Total Hours	Average hours per Week	Dates of Employment	Type of Work	Name of Employer / City, State

Community Service

List volunteer work or community service you performed without pay over the past three years, with the most recent first.

Total	Dates of	Turne of Comvine	Name of Agenesis or Organization / City, State
Hours	Participation	Type of Service	Name of Agency or Organization / City, State



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Extracurricular Activities

Please list extracurricular activities you participated in and any leadership roles attained.

	Leadership Role, if attained				
Activity:	if attained	Year			Please describe:
		10 □	11	12 □	
		10 □	11	12 □	
		10 □	11	12 □	
		10 □	11	12 □	
		10 □	11	12 □	
		10 □	11	12	
		10 □	11	12 □	

Honors / Awards

Please list any honors, sports, thespian, civic, community, merit, and any other awards you may have received.

Award Name:	Year		Year			Please describe why you earned the award:
	10 □	11	12			
	10 □	11	12 □			
	10 □	11	12 □			
	10 □	11	12			
	10 □	11	12			
	10 □	11	12			
	10 □	11	12			



Parental Financial Analysis (If tax return has not filed yet, please include an estimate income for upcoming year.)

	ent/Guardian Age Occupation ent/Guardian Age Occupation	
Cust	todial Parent's marital status as of today (choose one):	
	Mother: Married Single Widowed Divorced	
	Father: Married 🗆 Single 🗆 Widowed 🗆 Divorced 🗆	
Α.	OME: Parent/Guardian last year annual gross income (earned from work) \$ Parent/Guardian last year annual gross income (earned from work) \$ Total income \$	\$
	All other income not included above*** (including pensions, IRA/Keogh, 401(k), Social Security/disability benefits, child support, rent-free housing, etc.) r Social Security, only report benefits for parent(s) and other siblings. Do not include benefits received by the applicant.	\$
<u>Farn</u> D.	o me Source , if not from an employer: <u>n or Business</u> Year business was started% of ownership	
F. G.	Market value of farm or business, if sold today \$ Parent/guardian liability responsibility amount? \$ Farm or business equity \$ Parent/Guardian last year annual gross income (earned from this business) \$	
<u>Ren</u> I. J. K. L. M.	tal Property Year rental business was started% of ownership Market value of rental property, if sold today \$ Parent/guardian liability responsibility amount? \$ Rental property equity \$ Parent/Guardian last year annual gross income (earned from this business) \$	\$
	TOTAL GROSS INCOME	\$
ASS	SETS:	
	Market value of home if parents were to sell it today \$ Year home was purchased \$ Amount of unpaid mortgage \$	
Ρ.	Amount of Home Equity \$ Value of bank accounts \$ Value of other investments (CDs, stocks, bonds, college savings plan, etc.) \$ TAL VALUE OF NET ASSETS \$	_

Q. Amount student has (personal assets from work gifts/trusts, friends, relatives, etc.)



Parental Financial Analysis continued

HOUSEHOLD EXPENSES:

- R. Medical and Dental Expenses not paid by insurance expected in upcoming year (If over \$5,000, explain circumstances in parental statement.)
- S. What is the household monthly rent or mortgage payment?

\$		

\$

T. Number of minors in the family who receive the majority of their support from these parents/guardians.

Name	Age	In college Y/N	College attending

U. Please list any additional support provided by these parents/guardians:

Name	Age	Extenuating circumstances:
		-

V. Please explain any unforeseen circumstances that may have occurred recently that impact the household finances not represented above?