# **Gallipolis Elks Lodge #107**

# **2024**

# **Past Exalted Ruler’s Association Scholarship**

# **Application**

Educational scholarships are available to graduating seniors from Gallia and Meigs Counties in Ohio and Mason County in West Virginia. All amounts awarded will be paid directly to the institution that the applicant plans to attend. Awards will be based on the applicant's financial need, and scholastic and leadership qualities. The applicant should fill out all parts of the application. The application must be accompanied by an official transcript of the applicant’s grades, a copy of their ACT and/or SAT results and at least 2 letters of recommendation.

All scholarship recipients will be asked to submit a brief biography (name of parents/guardian(s), institution they will be attending, course of study, etc.) for media purposes. All scholarship recipients must also provide the Past Exalted Ruler’s Association the phone number and mailing address of the Bursars/Admissions Office of the institution they will be attending and their student identification number. Failure to comply with these requirements will void such award.

The deadline for the return of the application to the Gallipolis Elks Lodge is **Wednesday, July 3, 2024.** Please complete the application and return to:

Past Exalted Ruler’s Association

Gallipolis Elks Lodge #107

P.O. Box 303

Gallipolis, OH 45631-0303

Gallipolis Elks Lodge #107

Past Exalted Ruller’s Association Scholarship Application

**Personal Information**

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| Full Name |  |  | | | | |  | Date: | |  |  |
|  |  | Last | First | | M.I. | |  |  | |  |  |
| Address: |  |  | | | | |  | Phone: | |  |  |
|  |  | Street address | | | Apt/Unit # | |  |  | |  |  |
|  |  |  | | | | |  | Email: | |  |  |
|  |  | City | | State | Zip Code |  |  | |  |  | |

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| Age: |  |  | | | | |  | Sex: |  |  | |  |  |
| Birth Date: |  |  | | | | |  | Birthplace: |  |  | |  |  |
| Institution Attending: |  |  | | | | |  | Student ID #: |  |  | |  |  |
|  | | |  |
| Course of Study (Major/Minor): | | | | |  |  | | | | |

**Family Information**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Father’s Name: | | |  |  | | | |  | | Age: |  | |  | |
|  |  | Last | | | First | | M.I. |  |  | | |  | |  | |
| Address: |  |  | | | | | |  | Occupation: | | |  | |  | |
|  |  | Street address | | | | | Apt/Unit # |  |  | | |  | |  | |
|  |  |  | | | | | |  | Employer | | |  | |  | |
|  |  | City | | | | State | Zip Code |  |  | | |  | |  | |

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| Mother’s Name: | |  |  | | | |  | Age: |  | |  | | | | | | |
|  |  | Last | | First | | M.I. |  |  | | |  | | |  | |
| Address: |  |  | | | | |  | Occupation: | | | | |  | |  | |
|  |  | Street address | | | | Apt/Unit # |  |  | |  | |  | | | | | |
|  |  |  | | | | |  | Employer: | |  | |  | | | | | |
|  |  | City | | | State | Zip Code |  |  | | | | |  | |  | |

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| Number of brothers & sister still at home: |  |  | | |  | Ages: |  |  |  |  |
| Number of brothers & sisters in college: |  |  | | |  | Ages: |  |  |  |  |
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**References**

Please list three references.

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| Full Name: |  |  | | |  | Relationship: |  |  |
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| Address: |  |  | | |  | Phone: |  |  |
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| Occupation: |  |  | | |  | Email: |  |  |

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| Full Name: |  |  | | |  | Relationship: |  |  |
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| Address: |  | . | | |  | Phone: |  |  |
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| Occupation: |  |  | | |  | Email: |  |  |

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| Full Name: |  |  | | |  | Relationship: |  |  |
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| Address: |  |  | | |  | Phone: |  |  |
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| Occupation: |  |  | | |  | Email: |  |  |

**Education**

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| High School: | | |  |  | | | | | | | | | | | | |  | | Address: | | | | | | |  |  | | | | | | | | | | | | |
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| From: |  |  | | | | | |  | To: | | | |  |  |  | Did you graduate? | | | | | | | | | | | | Yes | | | No | | |  | Diploma: | | |  |  |
| Curriculum/Course of Study: | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Rank in Graduating Class: | | | | | | | | | |  | |  | | | | | | | | | |  | | Number in Graduating Class: | | | | | | | | | | | |  |  | | | | |  | |  | |
| Does your Institution require an ACT and/or SAT Score? | | | | | | | | | | | | | | | | | |  | | Yes | | | | | No | | | |  |  | | | | | | | | | | | | | | | | |
| ACT Score: | | | | | |  | |  | | | | | | | | | | | | |  | | SAT Score: | | | | | | | | |  |  | | | | | | | |  | |  | |
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**Leadership - Extracurricular Activities - Service**

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| **Scholarships, Honors and Awards:** | |  |  |
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| **Extracurricular Activities:**  Include the number of years of participation as well as position of leadership. | |  |  |
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| **Non-School Activities:**  Include the number of years of participation. | |  |  |
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**Financial Summary**

**Applicant**:

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| Cash, Checking and Savings: |  |  |

**Family** (optional):

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Annual Income: |  |  | | | | | | |  | Cash, Checking & Savings: |  |  |
|  | | | | |  |  | | | | | | |
| Home Value: |  |  | | | | | | |  | Home Debt: |  |  |
|  | | |  |  | | | | | | | | | |
| Monthly payment amount on vehicle(s): | | | | | | |  |  | | | | |  |

**Career Goals**

On a separate piece of paper, briefly outline your career goals. Should you choose, please disclose any specific financial circumstances affecting your need for this scholarship and include this in your career goals letter.

**Scholarships - Financial Aid - Grants**

Have you been awarded, or received notice of, any scholarship(s) or financial aid as of the date of submission of this application? If yes, please list them and their amounts:

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Have you received or expect to receive, a Pell Grant or any other government grant(s)? If yes, please list them and their amounts:

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**Letters of Recommendation**

At least two letters of recommendation must be submitted with this application. The people writing the letters of recommendation should attest to the applicant’s qualities as well as their financial needs for the scholarship. You may submit more than two letters of recommendation.

* One letter may be from a family member such as a parent, guardian, or grandparent.
* The other letter(s) must be from people outside your family.

**Disclaimer and Signature**

I certify that my answers are true and complete to the best of my knowledge.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Signature: |  |  |  | Date: |  |  |