

APPLICATION FOR  
ADA ELKS LODGE SCHOLARSHIP

(PLEASE PRINT LEGIBLY OR TYPE.)

Date \_\_\_\_\_

**GENERAL**

Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
Last First Middle

Social Security Number \_\_\_\_\_ Phone \_\_\_\_\_

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

High School Senior \_\_\_ College: Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior \_\_\_

Have you been a past recipient of this scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_

Are your parents living? \_\_\_\_\_ Deceased? \_\_\_\_\_ Divorced \_\_\_\_\_

Has anyone in your family ever been a member of the Elks Lodge? Yes \_\_\_ No \_\_\_

Number of dependent children in family under 18 years of age. \_\_\_\_\_

What are their grade levels in school? \_\_\_\_\_

Occupation of Father? \_\_\_\_\_ Approximate annual income \_\_\_\_\_

Occupation of Mother? \_\_\_\_\_ Approximate annual income \_\_\_\_\_

Does this income include government compensation or disability benefits? \_\_\_\_\_

Are you eligible for or do you receive Social Security benefits? \_\_\_\_\_

If so, when will these benefits terminate? \_\_\_\_\_

**HIGH SCHOOL INFORMATION**

High School attended \_\_\_\_\_

Date of Graduation \_\_\_\_\_ GPA \_\_\_\_\_ ACT composite \_\_\_\_\_

**HIGHER EDUCATION INFORMATION**

College & Dates attended (if applicable) \_\_\_\_\_

Major \_\_\_\_\_ Minor \_\_\_\_\_ GPA \_\_\_\_\_

Hours Completed \_\_\_\_\_ Expected Date of Graduation \_\_\_\_\_

Please include one letter of recommendation from your high school counselor or college advisor, whichever is applicable, and also attach a copy of your high school or college transcript.

Please submit your completed application to:

East Central University Foundation  
1100 E. 14th  
PMB Y-8  
Ada, OK 74820

**APPLICATIONS DUE MARCH 1.**