

Montana State Elks Association, Inc.

William and Sara Jenne' Scholarship Application Form

Requirements: This Scholarship is intended for students who have completed their first year of instruction at a Montana institution of higher learning and intend to continue their education into their second year of study at a Montana school. Applicants must be able to demonstrate the completion of full year of study and cumulative GPA of 2.0 to be considered.

This application and any attachments become the property of the Montana State Elks Association and will not be returned to the applicant. The application must be filled out completely. Attachments may be included that amplify and support the application. Care should be taken not to include unnecessary information.

Applications must be mailed no later than June 1st and winners will be notified no later than August 15th of the same year and will be given instructions at that time on how to collect the award.

Name: _____
Last First Middle

Mailing Address: _____ **Phone :** _____
_____ **Email:** _____

Personal Information:

Date of Birth: _____ Place of Birth: _____

Marital Status: Single ___ Married ___ Separated ___ Divorced ___

Dependents: Yes No (If yes, please list ages of each dependent.)

1. _____, 2. _____, 3. _____

High School Attended: _____ Graduation Date: _____

High School GPA: _____ Class Rank: _____

Montana College/University that you attended last year: _____

Montana College/University that you plan to attend next year: _____

Field of Study: _____ GPA: _____

Number of Credits Completed: _____

Financial Information: Please list the amounts available for your next year of study:

Personal savings \$ _____

Scholarships \$ _____

Grants \$ _____

Loans \$ _____ Outstanding Loans (unpaid) \$ _____

Family Support \$ _____

Employment \$ _____

Other \$ _____

Total: \$ _____

What is the anticipated expense for your second year of education? Please include all expense, room and board, tuition, fees, books, travel to and from school, etc.

\$ _____

Give a brief statement of your plans to finance your continuing education:

Please describe your financial accountabilities outside of your education costs. (Family support, house or car payments, loans other than educational, medical expenses, etc.)

Employment:

Are you presently employed? Yes or No Number of hours worked per week. _____

What percentage of your earnings are you able to use for educational expense? _____%

Please describe the circumstances of your employment. Is your employment seasonal, summer only, full or part time? What are your duties and responsibilities? Is your employment related to your field of study?

Field of Study:

Please describe your field of study. Include your interest in this field, the application of the knowledge and any special circumstances surrounding your choice.

Special Considerations:

Please describe in this section any factors that you feel amplify your need and worthiness for consideration. You may include and special hardships, personal and financial needs not previously covered, or additional information that you feel would help the committee in their selection process.

Interests and Activities:

Please describe your involvement in recreational, community and/or volunteer activities.

To this completed application:

- attach a legible copy of an official transcript of your completed first year's study and grades along with;
- two letters of recommendation. The letters of recommendation should *exclude* family members and *include* educators, employers or community leaders that can testify to your desire for continued education and the importance of your need for financial assistance.
- any attachments.

Mail this application, no later than June 1st to:

Robert J. Byers
Attn: Scholarship
P.O. Box 1274
Polson, MT 59860

I hereby certify that all statements in this application are true and correct to the best of my knowledge:

Applicant's Signature

Date