

Roger J. Sheriden Memorial Scholarship Application "To honor the man who gave so much to so many"

Student Information

			US Citizen? Yes No
First Name	Middle	Last Name	
Mailing Address			
Date of Birth	Age	Gender	
School Info	rmation		
Name of Schools Attended (C	Grades 9 th – 12 th)	Dates Attended	
Name of Schools Attended (O	Grades 9 th – 12 th)	Dates Attended	
Graduation Date:		What is the applicant's class rank? This applicant ranks	in a class of
Applicant's ingrest test scores.	SAT: Critical	Reading: Math	Combined
	Date tal	xen:	

By Signing this application, you agree, if asked, to provide information that will verify the accuracy of your completed application. This information may include a copy of your U.S. or State income tax form. If you purposely give false or misleading information, you will be disqualified from this contest.

Signature (Student Applicant)	Date
Signature (Parent/Guardian 1)	Date
Signature (Parent/Guardian 2)	Date

Lodge Endorsement for Judging

The Scholarship Chair, Exalted Ruler, or Secretary of the BPOE Elks Lodge in the jurisdiction in which the applicant is a resident must sign the lodge endorsement, certifying that he/she has reviewed the application and verifies that it conforms to the requirements of this competition. Applications should NOT be endorsed if they do not conform substantially with the requirements outlined in this application of required facts.

This application with attached exhibits, has been reviewed, and it conforms with the rules and regulations set forth by the Scholarship Committee of the Vermont Elks Association, Inc.

Signature (Scholarship Chair, Exalted Ruler or Secretary)

Date

Lodge Number

Lodge Name

College Plans State your plans for enrollment in an accredited American college or university. Include your planned course of study.

List below institutions accepting you as an applicant:

Name of Institute	Length of Program	Estimated Annual Costs (USD)
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Employment & Community Service

List below present & past employment (4 years), beginning with most recent. Please list avg hours worked per week.

Date of Employment (From – To)	Employer (Include City, State)	Position Held/Duties Performed	Avg Hours/Week

List community service performed (without pay)

Date of Service (From – To)	Organization (Include City, State)	Position Held/Duties Performed	Avg Hours/Week

Honors & Awards

Include scholastic, extracurricular, civic honors/awards received (9th – 12th grade) (i.e., 12th, Eagle Scout, Received Rank of Eagle)

Grade when received	Type of Award	Nature of the Award

Positions of Leadership

Include name of organization, position held, and when (9th – 12th grade) (i.e., 12th, Soccer Team, Captain)

Grade when held	Organization	Position Held

Activities/Extracurricular

Include school and extracurricular activities you have participated in during grades 9th – 12th (i.e., 12th, Girl Scouts; 11-12 Baseball)

School or extracurricular Activity	Grades when participated

Financial Requirements

Specify financial requirements below (Please note that the information provided will remain CONFIDENTIAL.)

1.	Parent/Guardian #1 Occupation AGI		
2.	Parent/Guardian #2 Occupation AGI		
3.	Household Annual Adjusted Gross Income (Line 1 + Line 2)		
4.	Number in the Household		
5.	Number of Dependents attending college (including applicant)		
6.	Annual college costs for applicant		
7.	Financial Resources already awarded or provided or secured		
8.	Financial contribution that will be provided by Student/Family		
9.	Remaining financial coverage needed (Line 6 – (Lines 7 + 8)		

Provide additional information below describing the particulars of the financial need, i.e., Identify number of dependent children in the family and number of those attending school or college, medical expenses, or other financial burdens, extenuating circumstances.