

NORTH CAROLINA STATE ELKS ASSOCIATION

Year 2012 "Nursing" Scholarship Competition

IMPORTANT: Before completing, please read and follow guidelines outlined on page 4. Application must be filed with the Lodge of jurisdiction on or before December 2, 2011. After verification, the Lodge must file the application by January 9, 2012 with the Chairman of the State Scholarship Committee for judging. If selected, the applicant will be notified by the state chairman no later than February 28, 2012.

Memorandum of Required Facts (use typewriter)

Student's Full Name _____ email: _____

Social Security Number: _____ - _____ - _____ Telephone: (____) _____ Cell: (____) _____

Student's Address _____
Street City State Zip

Date and Place of Birth ____/____/____
City County State

High Schools attended (ninth through twelfth grades)

Name of School Dates Attended

Name of School Dates Attended

Graduation Date _____ Class Rank _____ Number of students in class _____

Date: _____ Signed by _____ (Student)

Date: _____ Signed by _____ (Mother/Stepmother)

Date: _____ Signed by _____ (Father/Stepfather)

For Lodge Use Only---Must Have LODGE ENDORSEMENT to Be Accepted for Judging

The Scholarship Chairperson, Exalted Ruler or Secretary of the B.P.O. Elks Lodge must sign the Lodge endorsement, certifying that he/she has reviewed the application and verifies that it conforms to the requirements of the competition. Applications should not be endorsed if they do not conform. **Applicants must use the current-year application.**

This application, with attached exhibits, has been reviewed and it conforms with the rules and regulations set forth by the NCSEA Scholarship Committee.

Lodge Name: _____ No: _____

Date: _____ (signed) _____
Lodge Scholarship Chairman, Exalted Ruler or Secretary

Please list the following **HEALTH CARE ACTIVITIES** you participated in including dates and whether employed or volunteer:

PARTICIPATION IN NURSING RELATED ACTIVITIES:

Volunteer/Work in Hospital/Medical Centers

Volunteer/Work in Nursing Homes or Retirement Centers

OTHER VOLUNTEER ACTIVITIES:

Blood Drives

CPR Certification

First Aid Certification

Medical Explorers' Scout

MEMBERSHIPS/CERTIFICATIONS

HOSA _____

CNA _____

OTHER _____

NORTH CAROLINA STATE ELKS ASSOCIATION
Parental Financial Analysis

Father/Stepfather/s Name _____ Age _____ Occupation _____

Mother/Stepmother's Name _____ Age _____ Occupation _____

Parent's ADJUSTED GROSS INCOME from 2010 IRS 1040 _____

A. Number of dependent children in household _____ (A)

B. Number of dependent children attending college
During academic year 2011-2012 (Exclude applicant) _____ (B)

C. 2010 Medical/dental expenses not paid by insurance _____ (C)

D. Market value of home if sold today _____ (D)

Year home was purchased _____

E. Amount of Unpaid Mortgage _____ (E)

F. Home Equity _____
(D-E)

G. Farm or Business ____yes ____no

Year business was started _____

H. Market Value of Business if sold today _____ (H)

I. Amount of unpaid mortgage _____ (I)

J. Farm or Business Equity _____
% of Ownership _____ (H-I)

K. Value of Bank Accounts _____ (K)

L. Value of Other Investments (CDs, Stock, etc) _____ (L)

M. Value of other Rental property _____ (M)

N. Total of Other Assets _____
(K+L+M)

TOTAL VALUE OF NET ASSETS _____
(F+J+N)

Work Positions held by Applicant; periods of employment; average time employed each week;
Earnings; etc. _____

The name of the institution(s) which has accepted you for enrollment _____

State what other applications you have made for Nursing scholarship aid. Give details

Have you been granted Nursing scholarship aid? _____ If so, give details.

Have you reason to expect Nursing scholarship aid from any other source? _____
If so, give details _____

Year 2012 “Nursing Application Instructions

Applicant must use the official Year 2012 “Nursing” Application.

This is a \$1,000 one year scholarship award.

The student must be accepted for enrollment in a NORTH CAROLINA school that has a Nursing school/program which, upon completion, qualifies the student to write the licensing examination for registered nurse. Payment will be made directly to the school attended by the student upon receipt of proper enrollment verification.

Applicants should be in the top 25% of their class and be actively involved in nursing related activities (as noted on the Health Care Activities section) In addition, science grades will be given considerable weight. The Unweighted GPA should be at least 2.50 and above.

Presentation is very important. Elaborate presentation is unnecessary....but, careless presentation definitely handicaps the applicant. Papers should be on letter-size paper; bound neatly in a 3-hole paper folder; letters, transcripts, and exhibits should be removed from envelopes and placed in the proper order. Exhibits evidencing notable achievements in scholarship, leadership, athletics, dramatics, community service, church service or other activities may be attached. (avoid repetition)

In addition to the “Memorandum of Required Facts” which should be first in the folder, the following essential details must be included in order as indicated:

Applicant will provide a transcript of High School Record. Your unweighted GPA must be included

A letter from the school principal and/or guidance counselor regarding citizenship, leadership ability, attendance, and reliability.

A statement from parents or guardians stating (1) that there is a need for financial assistance, (2) father’s and/or mother’s occupation and annual income, (3) and significant data/condition in family which shows special burdens on the family.

One to three letters of endorsement from responsible persons not related to the applicant who can attest to the moral character, industry, purposefulness and general worthiness of the applicant.

A personal letter by the applicant entitled “Why I want to become a Nurse”

Applicant must be a citizen of the United States of America.

Applications must conform substantially to the above requirements!