

CALIFORNIA-HAWAII ELKS MAJOR PROJECT, INC.

UNDERGRADUATE SCHOLARSHIP PROGRAM FOR STUDENTS WITH DISABILITIES ACADEMIC YEAR

The California-Hawaii Elks Major Project, Inc, is offering scholarships to students with disabilities. This is a financial needs-based and academic use scholarship intended for undergraduate work at a licensed vocational school, accredited community college, or four year college/university only. The funds are to cover academic expenses which include tuition, books, lab fees and/or on-campus room and board only.

Scholarship awards are normally \$1,000 for community colleges or vocational schools and \$2,000 for four-year colleges or universities per year. Exceptions are determined by the Scholarship Committee. After initial award, reapplication for a maximum of three (3) renewals is possible for a total of four (4) years, or until undergraduate degree is achieved, whichever comes first. Renewal applications will be judged yearly.

Eligibility

To be eligible to apply, individuals must (1) be a United States citizen; (2) be a resident of California or Hawaii; (3) have a physical impairment, neurological impairment, visual impairment, hearing impairment, and/or speech/language disorder; and (4) be a senior in high school, a high school graduate, or have passed the General Educational Development (GED) Examination or the California High School Proficiency Examination (CHSPE).

Application Time Line

The application packets will be accepted in the California-Hawaii Elks Major Project, Inc. office beginning February 1, 2013 to be considered for the 2013-2014 academic year.

The entire application must be completed and postmarked on or before March 15, 2013 and received in the Fresno office by April 1, 2013 or it will be immediately rejected.

The applicant is solely responsible for all information reaching the California-Hawaii Elks Major Project, Inc. office.

Application Guidelines

Applicant must use the official Undergraduate Scholarship for Students with Disabilities application designated for the approaching academic year and all instructions must be followed or the application will not be submitted to the Scholarship Committee for judging.

Typewritten applications are preferred over handwritten submissions. Handwritten applications must be completed in black ink. Illegible forms will not be submitted to the Scholarship Committee for judging.

Applications and all supporting documents must be in English.

After completing this application, make a photocopy for your records. All applications become the property of the California-Hawaii Elks Association and the California-Hawaii Elks Major Project, Inc.

Mail completed application

Arrange items in this order:

- Page 2 – **must be signed by Lodge official**
- Transcript(s) – **sealed**
- Page 3
- Page 4
- Letter of Recommendation
- Clarification of Disability Report
- Page 5
- Page 6 – **must be Signed & Dated**

Place your entire scholarship packet in a large envelope. Do not fold or insert application into a folder or binder. Then mail packet to:

Scholarship Committee
California-Hawaii Elks Major Project, Inc.
5450 E. Lamona Avenue
Fresno, CA 93727-2224

CALIFORNIA-HAWAII ELKS MAJOR PROJECT, INC.
UNDERGRADUATE SCHOLARSHIP PROGRAM FOR STUDENTS WITH DISABILITIES
ACADEMIC YEAR 2013-2014

Applicant's Name _____
Last, First Middle Initial

Lodge Endorsement

The Scholarship Chairman, Exalted Ruler or Secretary of a B.P.O. Elks Lodge must sign the lodge endorsement below. The sponsoring Lodge is not responsible to interview the applicant or verify that this application conforms to the Undergraduate Scholarship Program for Students with Disabilities requirements. The sponsoring Lodge must not open the applicant's sealed transcript or confidential envelopes. The applicant is solely responsible for forwarding the completed application packet to the California-Hawaii Elks Major Project, Inc. office.

Lodge Name: _____ No: _____ State: _____

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

Phone: (____) _____ (printed) _____
Lodge Scholarship Chairman, Exalted Ruler, or Secretary

Letter of Recommendation

Include one letter of recommendation from a school counselor or administrator who is familiar with the applicant. Letter must be original, dated, and signed by the author. Copies or faxes are not acceptable. It should be limited to one side of a 8.5-inch by 11-inch sheet of paper and typed. The letter should cover the following: how long they have known the applicant, if any schools have been recommended to applicant and why, applicant's academic and occupational goals, a frank evaluation of the applicant's character, sincerity of purpose and appropriateness of goals and estimation of the applicant's probable success in college or a vocational school. List the School Counselor/Administrator's name, and phone number. _____

Clarification of Disability Report

Include one report from a qualified professional who specializes in the applicant's disability and is most familiar with the applicant. Report must be original, dated, and signed by the author. Copies or faxes are not acceptable. It should be limited to one side of a 8.5-inch by 11-inch sheet of paper and typed. The report should cover the following: the applicant's diagnosis and degree of the disabling condition, how the disabling condition affects ongoing medical care and function, what special adaptations the applicant has to make for education mobility and communication, and current functional status based on the most recent tests. (Depending upon the applicant's disability, a qualified professional could include a special educator, therapist, school psychologist, audiologist, optometrist, medical physician, etc.) List the Qualified Professional's name, and phone number. _____

Transcripts

Include all, official, complete, transcripts of student grades. Transcripts must be sealed.

- Sealed Official Transcript will be: mailed by school included in this packet.
- If applicant is a senior in high school or high school graduate that has not attended college, obtain applicant's high school transcript. If applicant is or was a college student, obtain applicant's college transcript.
 - If applicant is a freshman and the college transcripts are not available prior to the deadline, submit high school transcript. Your college transcript is to be sent as soon as it becomes available.
 - If you obtained a General Educational Development (GED) certificate or California High School Proficiency Examination (CHSPE) certificate and do not have a college transcript, then obtain verification of your GED or CHSPE. If applicable, include your high school transcript. Also state why you obtained a GED or CHSPE instead of a high school diploma.

List the high school/colleges that you have attended.

<u>Name</u>	<u>Dates Attended</u>	<u>GPA</u>	<u>Did you Graduate?</u>

Applicant's Information

Name _____ Social Security # xxx-xx- _____
 Last First Middle Initial

Mailing Address _____ Phone (____) _____
 Area Number

City, State, Zip _____ Email _____

Date of Birth ____ / ____ / ____ Age: ____ Sex: ____
 Month/Day/Year

Grade level in college beginning July 1st? Freshman Sophomore Junior Senior

Have you previously applied for this scholarship? Yes No

Are you currently a United States citizen and a California or Hawaii resident? Yes No

Name your disability. _____

Describe your disability. _____

To what degree does your disability affect your education, mobility and communication? _____

What special equipment, devices, and/or supportive services do you require? _____

State your career goals. _____

State your planned course of study. _____

List your extracurricular activities, interests and/or hobbies. _____

List your previous work and/or volunteer experiences.

<u>Kind of Work</u>	<u>Name of Employer/Agency</u>	<u>Dates of Employment/Service</u>	<u>Total Hours</u>

Self-Evaluation Essay

Prepare an Essay. This essay must be written in your own words. Try not to be redundant by repeating the information already addressed on this application.

Determine Independent or Dependent Student Status

Claiming Independent Status:

Applicant is considered an independent student if at least one of the criteria listed below applies to you. If you think you have unusual circumstances that would allow you to claim Independent Student Status, even though none of the below criteria applies to you, it is mandatory that approval be obtained to claim Independent Student Status by calling the Fresno office at (559) 255-4531.

If claiming Independent Student Status, check the criterion that applies:

- I will be 21 years of age prior to the upcoming academic year.
- I am married.
- I have legal dependents other than a spouse.
- I am an orphan or ward of the court (or was a ward of the court until age 18).
- I am a veteran of the U.S. Armed Forces.
- I have received approval from the Scholarship Committee to claim independent student status.

Applicant's Occupation: _____

Spouse's Name: _____ Occupation: _____

Claiming Dependent Status

The following are guidelines to determine which custodial parent's information should be used and who **must sign** the appropriate section of this application.

- If applicant's parents are both living together, use both.
- If applicant's parents have divorced or separated use the parent who provided the most financial support during the last 12 months. If that parent is remarried as of today, use that parent and the person whom that parent married.
- If applicant's parent is widowed or single, use that parent. If applicant's widowed parent is remarried as of today, use that parent and the person whom that parent married.

Custodial Parent: _____ Age: _____ Occupation: _____

Custodial Parent: _____ Age: _____ Occupation: _____

Financial Analysis

		Applicant & Spouse	Custodial Parent(s)
A.	2012 Annual Income (earned from work)	\$	\$
B.	Other taxable income from 2012 IRS 1040 (all schedules)	\$	\$
C.	Adjusted gross income from 2012 IRS 1040 (bottom line of first page)	\$	\$
D.	All non-taxable income not included above (including SSI/SSA, pensions, CalWORKs, TANF or First-To-Work), alimony, child support, interest income, etc.)	\$	\$
Gross Income (C + D)		\$	\$
E.	Current market value of home	\$	\$
F.	Amount of unpaid mortgage	\$	\$
Home Equity (E - F)		\$	\$
H.	Value of other rental property	\$	\$
I.	Market value of farm or business	\$	\$
% of ownership: _____ Year business was started _____			
J.	Amount of unpaid Farm &/or Business mortgages	\$	\$
Farm &/or Business Equity (H + I - J)		\$	\$
L.	Value of bank accounts	\$	\$
M.	Value of other investments (CDs, stocks, bonds, etc.)	\$	\$
Total of Other Assets (L + M)		\$	\$
TOTAL VALUE OF NET ASSETS (G + K + N)		\$	\$

List legal dependents and state their relationship to applicant: _____

Number of dependents attending college during upcoming academic year on a full time basis (include applicant): _____

Financial Statement

The custodial parent (if Dependent Student Status) or applicant (if Independent Student Status) must prepare a statement of summarizing the family’s obligations and resources. The statement should illustrate the applicant’s need for financial assistance and the inability to meet these needs.

List school(s) for which you have applied or will apply. State the cost of tuition and type of school; licensed vocational school, accredited community college, or four year college/university.

<u>Tuition Cost</u>	<u>Name</u>	<u>Type</u>

State the reason for selecting the school(s): _____

List all scholarships for which you have applied, their amounts and if they have been awarded. If you have not been notified whether or not you will receive an award, state expected date of notification.

<u>Amount</u>	<u>Name</u>	<u>Awarded – Yes/No/Waiting Date</u>

Application Signature

Must be dated and signed by the student and if dependent status applies to applicant then custodial parent(s) must also sign. By signing this application, you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include a copy of your U.S. income tax form or financial aid notification letter. If you purposely give false or misleading information, you will be disqualified from this program.

Date: _____ Signed by _____ (Student)

Required for dependent students: Signed by _____ (Custodial Parent)

Signed by _____ (Custodial Parent)