Massachusetts Elks Career & Technical Education Grant Program (CTE)

The Massachusetts Elks CTE Grant Program has been established through the generosity of the Elks National Foundation so individual students who are going to school full time in a post high school non-bachelor's degree/technical program. The individuals applying for this award need to be attending a technical school, a junior college, or a community college working on a one or two-year program of studies that will further their education culminating in an associate degree, diploma or certificate is less than a bachelor's degree. A student must plan to carry a minimum load of 12 semester credit hours each term.

There is no age limit; however, all applicants must be citizens of the United States.

The CTE grant is for a one-year period only; however, the applicant may reapply for a second year.

All grants are in the form of Certificate of Award issued by the Massachusetts Elks Association, conditioned upon enrollment of the student in a technical school, a junior college, or a community college. Upon receipt of the "Verification of Enrollment" form, completed by the proper school officials, a Massachusetts Elks Association check in the amount of $1,000.00 will be forwarded to the school to establish a credit for the student for the upcoming academic year. Payments may not be used to cover retroactive charges.

The grant/award may be used for tuition and fees, room, and board (only living on campus) and books and supplies. It may not be used for general living expenses.

Incomplete applications will not be considered for assistance. Applications which are not endorsed by an authorized Massachusetts lodge of the Grand Lodge B.P.O. Elks of the U.S.A. will be returned to the applicant.

All applications become the property of the Massachusetts Elks Association.

Directions: The following needs to be submitted along with the completed application. (Applications for grant renewal do not need to include #5 and #6)

1. Application: The applicant must use the official Massachusetts Elks Association form or a photocopy. It must be filled out entirely and signed by the applicant and the local Lodge exalted ruler, secretary, or scholarship chairperson. Financial information is of extreme importance.

2. A letter from an applicant giving reasons why they should be considered.

3. A letter from an applicant's parent/guardian or other person having knowledge of the facts, presenting a picture of the family situation, and showing the applicant's family background.

4. The applicant's academic Record (transcript) needs to be included if the applicant has attended school within the past five years, if not a work record for the previous three years.

5. Letter(s) from educators, not more than two discussing the applicants' ability, work habits, leadership, personality, and integrity needs. This does not need to be included if the applicant has not attended school within the past five years.

6. Letter(s) of recommendation from a responsible person not related to the individual who is not an educator, not more than two who can attest to the character, industry, disposition, and general worthiness of the applicant.

Applications must be filed with the local Lodge no later than March 1st. After endorsing, please mail to Elizabeth Sawyer, Massachusetts Elks CTE Scholarship Committee Chairperson, 171 Woodlawn Ave, Pittsfield MA 01201. Questions may be directed to the Chairperson or 413-499-0568. Applications need to be postmarked by the Lodge no later than March 15th.

Massachusetts Elks Association

Application for required facts.

CTE GRANT PROGRAM

Important: Read the instructions carefully before completing. Incomplete applications will not be processed.

Name: _____ Social Security #: _____

Street Address: _____ Phone: (____) _____

City/State/Zip: _____ E-mail: _____

Citizenship: US American: Yes _____ No _____ (Applicant must be a citizen on the date application is signed. If not born an American citizen, give date, and place of Naturalization.)

I am not a high school graduate, but I have received my G.E.D. Yes _____ No _____

Detailed educational background listing all Technical Schools, Colleges or other Schools, beyond high school level, attended or attending and degrees attained, if any.

School Name/Address	Date	Degree/Certificate
_____	_____	_____

I certify the statements contained in this application are true.

Date_____, 20____ _____

MUST HAVE ENDORSEMENT OF A LODGE OF THE MASSACHUSETTS ELKS ASSOCIATION TO BE ACCEPTED FOR JUDGING

The Scholarship Chairperson, Exalted Ruler or Secretary of the BPOE Elks Lodge, in the jurisdiction where the applicant is a resident, must sign the Lodge endorsement certifying they have reviewed the application. **Applications should not be endorsed if they do not essentially conform to the requirements outlined in this Application of Required Facts**. The Application must use the official Massachusetts Elks Association form or photocopy is acceptable.

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

Lodge Name: _____

Date: _____, 20_____ Signature: _____

TO LODGE PERSONNEL: This Application must be filed no later than March 1st. After endorsing this application, mail it to: Elizabeth Sawyer, Massachusetts Elks CTE Scholarship Committee Chairperson, 171 Woodlawn Ave, Pittsfield MA 01201. This application must be postmarked by March 15th. The Chairperson may be contacted at 413-499-0568 or specialkmom1@yahoo.com

College or Technical School you are planning to attend: _____

Address: _____

First year – Date course will begin _____,20__ Date course will end _____, 20__

Renewal Application – Date course will begin _____, 20__ Date course will end _____, 20__

Vocational Goal: (Give name of course of study) _____

At completion of this course, I will receive a Certificate ____ Diploma ____ or an Associate degree ____

Is this a 2-year course? Yes ____ No____ If no, how long is the course? _____

Do you plan to continue to a 4-year degree? Yes ____ No ____ Undecided _____

Employment record (employer, address, dates of employment, position, person to contact about employment).

Honors & Awards – Non School related (Civic)

Offices or positions held (Organization, position, year)

Other Activities (School or Civic)

TO BE COMPLETED BY ALL APPLICANTS

Budget for the coming Academic Year, how many months _____

This grant can be used only for the items in A, B & C below. It may not be used for general living expenses such as apartment rent, mortgage payment and automobile expenses for use or maintenance of a car. It may not be used for childcare costs.

A. Tuition and Fees (full academic year, not monthly) $_____
B. Books and Supplies $_____
C. Room and Board (only if living on campus) $_____
D. Total of above **Add** lines A, B & C $_____

LESS ANTICIPATED AMOUNTS AVAILABLE FOR EDUCATON (INCOME)

E. Parent(s) Contribution $_____
F. Student's Contribution $_____
G. Summer Earnings $_____
H. College Work / Study Employment $_____
I. Other Scholarships, Grants, or Loans (list name & amount) $_____
J. Total of above – **Add** lines E, F, G, H, & I $_____

Amount needed to balance the school budget for one year.
Subtract line J from line D $_____

This is an assistance grant and is not intended to cover the full cost of your education. It is the responsibility of the student to also seek assistance from other sources and to demonstrate the amount not covered by this grant can be obtained through personal or paternal contributions or through other sources of assistance programs.

To properly evaluate this application, the information on these pages is essential. Choose the area which best fits the applicant's circumstances. A dependent applicant is one who relies on their parents for the basic & major portion of their support. An independent applicant is one on their own and derives the basic and major portion of their support from themselves and/or a spouse. **Incomplete information in this area will disqualify applicants**.

TO BE COMPLETED BY UNMARRIED APPLICANT DEPENDENT

Father's name: _____ Age: _____ Occupation: _____

Mother's name: _____ Age: _____ Occupation: _____

Parents' marital status – Mother: _____ Widow: _____ Divorced: _____ Remarried: _____

Father: _____ Widow: _____ Divorced: _____ Remarried: _____

Father's annual income before taxes: $_____

Mother's annual income before taxes: $_____

Applicant's annual income before taxes: $_____

All other taxable or non-taxable income not included above: (including pensions, Social Security/disability, interest, dividends, etc. – (explain source) $_____

GROSS INCOME: (Total of above) $_____

Number of Dependents: (excluding mother & father) _____

Number of Dependents (including applicant attending college)? _____

Previous year Medical & Dental expenses not paid by insurance: $ _____

Emergency expenses: (details) $ _____

Total market value of home: $ _____ Amount of unpaid mortgage: $ _____

If not a homeowner, amount of annual rent paid: $ _____

Do you own a business or farm? Yes ___ No ___ If so, what is market value? $ _____

What is the net profit? $ _____

Value of bank accounts: $ _____

Value of other investments: (CD, stocks, bonds, etc. – explain source)

_____ $ _____

Does the mother or father have a pension plan other than Social Security? Yes _____ No _____

If there are any unusual circumstances, please explain:

TO BE COMPLETED BY MARRIED OR INDEPENDENT STUDENT

Applicant's marital status: Single _____ Married _____

Spouse's name: _____ Age: _____ Occupation: _____

Applicant's annual income before taxes: $_____

Spouse's annual income before taxes: $_____

All other taxable or non-taxable income not included above: (including pensions, Social Security/disability, interest, dividends, etc. – explain source) $_____

GROSS INCOME: (Total of above) $_____

Number of Dependents: (Excluding applicant and spouse) _____

Is Spouse attending school? Yes _____ No _____

Number of other Dependents attending School/College: _____

Previous year Medical & Dental expenses not paid by insurance: $ _____

Emergency expenses: (details) $ _____

Total market value of home: $ _____ Amount of unpaid mortgage: $ _____

If not a homeowner, amount of annual rent paid: $ _____

Do you own a business or farm? Yes ___ No ___ If so, what is market value? $ _____

What is the net profit? $ _____

Value of bank accounts: $ _____

Value of other investments: (CD, stocks, bonds, etc. – explain source)

_____ $ _____

If there are any unusual circumstances, please explain: