



Lockport Elks Lodge #41

6791 North Canal Road, Lockport, New York • 716-434-2798

**Guidance Office, Attn. Glenn Smith
Newfane High School
1 Panther Drive
Newfane, New York 14109**

TO: High School Guidance Offices

RE: Elks Scholarship Contact Information

FROM: Elks Lodge #41 2023 Scholarship Chair

Linda Hatswell, 716-438-0853 leshat@yahoo.com

MAIL Completed Applications

POSTMARKED BY APRIL 1, 2023 TO:

Elks Lodge #41 Scholarship Committee

6791 North Canal Road

Lockport, New York 14094

DROP OFF Completed Applications

MUST BE ARRANGED by calling Linda Hatswell

at 716-438-0853

BY APRIL 1, 2023



RODNEY CONRAD SR. MEMORIAL SCHOLARSHIP APPLICATION

FOR 4 YEAR DEGREE PROGRAMS IN EDUCATION,
ENGINEERING, SCIENCES, HUMANITIES, BUSINESS,
ACCOUNTING, AND MATHEMATICS
AND/OR
2 YEAR DEGREE PROGRAMS IN LAW ENFORCEMENT

APPLICANT INFORMATION

NAME _____

ADDRESS _____

PHONE _____ CELL _____ EMAIL _____

DATE OF BIRTH _____ NUMBER OF SIBLINGS _____

NUMBER OF SIBLINGS IN COLLEGE _____

HIGH SCHOOL INFORMATION

SCHOOL NAME _____

EXPECTED GRADUATION DATE _____ GPA _____

COLLEGE INFORMATION

COLLEGE NAME _____

SCHOOLYEAR BEGINS _____

THIS TERM I WILL BE A: FRESHMAN ___ SOPHOMORE ___ JUNIOR ___ SENIOR ___

BACKGROUND INFORMATION

What is your course of study and why did you choose to attend this college?

ACTIVITIES, HONORS, AND INVOLVEMENT

SCHOOL EXTRACURRICULAR ACTIVITIES YOU PARTICIPATED IN

INTERNSHIPS OR LEADERSHIP POSITIONS YOU HELD

HONORS YOU RECEIVED THE PAST 2 YEARS

COMMUNITY SERVICE INVOLVEMENT/VOLUNTEER POSITIONS

CURRENT EMPLOYMENT (where, number of hours, job description)

ESSAY

300 words or less, type-written and double-spaced

TOPIC: How will your education help you achieve your career objectives and future goals?

RECOMMENDATION LETTERS

Include 2 letters, written by teachers or responsible community members. Authors of the letters must not be related to you and must be signed and dated.

REQUIRED SIGNATURES

Applicants and Parents:

By signing this application, you agree, if asked, to provide additional information that will verify the accuracy of your completed application. If you purposely give false or misleading information, you will be disqualified from this grant program. Additionally, you agree to the use of your name and any information contained within the application for Elk advertising, promotional and publicity purposes without consent or compensation. Each scholarship is \$1,000.00 minimum. Payment of this scholarship will be based on educational invoices received by 10-1-2023. Scholarship recipients may apply annually for subsequent college year awards.

APPLICANT'S SIGNATURE _____

PARENT'S SIGNATURE _____

PARENT'S SIGNATURE _____

APPLICANT CHECK LIST

- ___ COMPLETED APPLICATION, SIGNED AND DATED
- ___ ESSAY QUESTION
- ___ TWO RECOMMENDATION LETTERS
- ___ OFFICIAL TRANSCRIPTS OF GRADES

**THIS APPLICATION MUST BE RECEIVED OR POSTMARKED
NO LATER THAN
APRIL 1, 2023**

**MAIL TO THE LOCKPORT ELKS #41
6791 NORTH CANAL ROAD, LOCKPORT, NEW YORK
OR
CALL CHAIR LINDA HATSWELL TO DROP OFF AT 716-438-0853**