

J.B. Ferguson Golf Scholarship

Only one \$500 grant will be offered statewide and each Nebraska Elks Lodge can submit an application. Open to boys or girls, applications must be completed in full, the applicant must be a member of his/her high school golf team and be planning to participate in a college golf program.

QUALIFICATIONS:

- 1. Complete the application blank in full. Must be signed and dated.*
 - 2. Must be a participant in high school golf and plan to participate in a college golf program.*
 - 3. May attend either a two or four year college.*
 - 4. Must be postmarked by 2/15/2022*
 - 5. Mail to: Dr. Candace Walton, 4019 Cannon Rd, Grand Island, Ne 68803, Attn: JBF Scholarship*
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NEBRASKA ELKS ASSOCIATION

J. B. FERGUSON GOLF SCHOLARSHIP ~ DUE BY FEBRUARY 15Th

Applicant's Name _____ Age _____

Address _____ City _____ State _____ Zip _____

E-mail address _____ Phone _____

Father's Name _____ Address _____

Mother's Name _____ Address _____

Are your parents both living? _____ How many brothers and sisters do you have? _____

What is your father's occupation? _____ Mother's occupation? _____

Have you any funds to start your college education? _____ If so, how much? _____

How long were you on your school golf team? _____ Do you intend to play golf on a team in college? _____

What is your handicap for 18 holes? _____ (Please verify by golf coach or golf course letter or USGA card)

What extra-curricular activities did you participate in while at school? _____ (Attach list and years of participation) _____

Have you ever held a job? _____ What did you do? _____

Submit three letters of recommendation from any of the following: Principal, Pastor of Church, present instructor, local business person, or employer; a copy of ACT or SAT test scores and a certified copy of your High School Transcript Record.

PARENT'S FINANCIAL STATUS

Adjusted gross income per Federal Income Tax return of the last filing year \$ _____

Number of dependants _____ Number of dependents currently attending college _____

Medical, dental, & emergency costs this past year not covered by insurance \$ _____

Total market value of home \$ _____ Amount of mortgage \$ _____

Total market value of farm or business \$ _____ Amount of mortgage \$ _____

What was your net profit? _____ Value of bank accounts and other investments? _____

Date _____ Father's signature _____ Mother's signature _____

APPLICANT'S AGREEMENT - I understand that each question on this form is for a purpose, and it will not suffice to submit an incomplete application. ALL information on this application is to be used solely by the Nebraska Elks Association for the purpose of this application.

Applicant's signature _____ Date _____

MUST BE POSTMARKED BY 2/15/2022

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4019 Cannon Rd.
Grand Island, NE 68803
Attn: JBF Scholarship

Updated August 2021