### SUPERIOR ELKS LODGE #2197 PO BOX 221 SUPERIOR, NE 68978-0221

# CROSS COUNTRY SCHOLARSHIP APPLICATION

#### **BOYS**

Applicants Name	Age	Social Security No.	
	City		
	Address		
	Address		
	How many brothers and sisters d		
	n?N		
Have you any funds to start your	college education? If so, how n	nuch?	
How many years have you been	on the Cross Country Team? Do you	intend to run Cross Country in Co	ollege?
What is your best time at a Cross	s Country Meet with 6 or more teams? Year	Year 2Year 2	ar 3Year 4
List any Post Season honors you	have attained. (state qualifier, state placing,	etc)	
What extra-curricular activities of	lid you participate in while in school?	_(Attach list and years participate	:d)
Have you ever held a job while is	n school? What did you do?		
Church, present instru	of recommendation from any actor, local business person, creares and a certified copy of your co	oss country coach, or en	mployer, a copy of
	PARENT'S FINANC	IAL STATUS	
Number of Dependant's	Number of dependents	currently attending college	
Medical, dental & emergency cos	sts this last year not covered by insurance		
suffice to submit an incom	EMENT—I understand that each que plete application. ALL information e purpose of this application.	estion on this form is for a p on this application is to be	urpose, ant it will not used solely by the
Applicant's signature		Date	
Father's signature	7	Date	1.2
Mother's signature		Date	
Cross Country Coach signature _		Date	

Submit by January 15, 2015

2008-09

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# CROSS COUNTRY SCHOLARSHIP APPLICATION

### **GIRLS**

Address		
Address	The state of the s	
How many brothers and sisters do you ha	ave?	
Mothers	occupation	
s Country Team? Do you intend	to run Cross Country in Col	lege?
Meet with 6 or more teams? Year 1	Year 2 Year	3Year 4
ed. (state qualifier, state placing, etc)		
cal business person, cross co	ountry coach, or endigh School Transo	ployer, a copy of
Number of dependents current	ly attending college	
Number of dependents current		
	on this form is for a pu	rpose, ant it will not
year not covered by insurance  —I understand that each question olication. ALL information on the	on this form is for a pu	rpose, ant it will not used solely by the
year not covered by insurance  —I understand that each question olication. ALL information on the of this application.	on this form is for a pu is application is to be uDate	rpose, ant it will not used solely by the
year not covered by insurance  —I understand that each question olication.  ALL information on the of this application.	on this form is for a pu is application is to be uDateDate	rpose, ant it will not used solely by the
	AddressAddress	

2008-09