

# 2026 SCC SCHOLARSHIP APPLICATION FORM



## NJ STATE ELKS

SPECIAL CHILDREN'S COMMITTEE  
PO Box 1596, Woodbridge, NJ 07095-1596  
(732) 326-1300  
[sccheadquarters@gmail.com](mailto:sccheadquarters@gmail.com)

## A SCHOLARSHIP DETAILS

Please read carefully **before** completing application.

The New Jersey State Elks Special Children's Committee award two \$10,000 scholarships to graduating seniors (one female, one male) and two \$4,000 runner up scholarships for the purpose of assisting students with disabilities in obtaining a college education. Scholarship aid in the form of payment of tuition in an amount not to exceed \$2,500 annually for the winner (\$1,000 annually for the runner-up) for up to four years is offered each year upon verification that said student has an excellent scholastic standing, general worthiness, financial need and a physical and/or mental disability including learning disabilities.

Upon a student being notified of his or her selection as a recipient of a Scholarship Award, the student shall immediately notify this committee by letter of his or her acceptance of the Award and the name and address of the college which the student will be entering. Payment of an annual tuition fee or the sum not to exceed \$2,500 (\$1,000 for the runner-up), toward the annual tuition shall be made by the committee to the college in such installments as provided by the Rules and Regulation of the particular college concerned. It will be required that the college keeps this committee informed of the progress and scholastic standing of the student.

The New Jersey State Elks Special Children's Committee will not pay tuition fees for more than four (4) years of college without special consent and agreement. This agreement and consent may be given in special circumstances at the discretion of the committee.

Applicants **MUST** be a bona fide resident of the state of NEW JERSEY and must be a senior attending a New Jersey High School at the time of submitting this application. The New Jersey State Elks Scholarship Committee may discontinue scholarship aid under this program at any time. Permission must be given to take and use any picture(s) of the applicants for any purpose that the said Committee may deem advisable and likewise make use of any pertinent information concerning the application.

Applications must be completed in entirety. The checklist on the last page must be adhered to and all applications must be signed by the student applying and his or her parents and guardians.

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**B PERSONAL INFORMATION**

Name of Applicant :

Phone Number :

Legal Residence :

E-Mail Address :

Place Of Birth :  Date Of Birth :       
D D M M Y Y

Disability :

List any aids used :   
(wheelchair, braces, etc.)

Number of people in applicant's family:  Number of dependents:

Father/Guardians 's Name :  Age:

Mother/Guardians 's Name :  Age:

Names and Ages of siblings, school attending and grade level:

**FAMILY INCOME:**  
1040 IRS Form : \$   
Interest : \$   
Dividends : \$



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**C EDUCATION**

**An official Transcript must be attached.**

**Name of School** : \_\_\_\_\_

**Date** : \_\_\_\_\_

**Rank in Class** : \_\_\_\_\_

**GPA** : \_\_\_\_\_

**SAT Scores** : \_\_\_\_\_

**Career Goal** :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Extracurricular Activities** :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Outside School Activities/Work** :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name & Address of colleges or other institutions to which you have applied** :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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### D SCHOLARSHIP APPLICATION CHECKLIST

I have completed the Scholarship Application and have also included the following information:

- Current photograph of applicant will be required on acceptance of the Scholarship (wallet size or 5x7)
- Letter from doctor describing in detail the nature and degree of disability and the limitations imposed by the condition. Total history from the study team is **not needed**.
- Official School Transcript
- Attach a comprehensive letter or letters of recommendation covering character and personality from at least one person (but not more than three people) in authority at the high school you attend.
- Attach two or three letters of endorsement from responsible persons not related to you (other than teachers) who have had an opportunity to personally interview you and who can give a worthwhile opinion of your character, industry, purposefulness and general worthiness.
- Attach a letter from a parent or guardian or other responsible person explaining the financial condition of your family in sufficient detail to enable the committee to judge your need for assistance.
- Copy of the most recent financial statement (1040 IRS Form) of the parent/guardian.
- Your letter stating your career goals and any other special facts, notes or comments you feel necessary to be included with this application.
- Name of the Sponsoring Elks Lodge (Lodge geographically nearest you).

### E SIGNATURES

The undersigned have read, understand and accept the Rules, Regulations and Conditions as herein set forth and the statements made herein and in the attached paperwork are correct.

Applicant

Father/Guardian

Mother/Guardian

Date

All applications must be received by the Scholarship Committee no later than April 10, 2026. When the application is completed, the application and ALL attached letters and documents must be emailed to: [sccheadquarters@gmail.com](mailto:sccheadquarters@gmail.com) with SEC Scholarship in the subject field.