

# 2024 PENNSYLVANIA MOOSE ASSOCIATION SCHOLARSHIP APPLICATION

## TO BE COMPLETED BY HIGH SCHOOL SENIORS

MUST BE POSTMARKED ON OR BEFORE JANUARY 13, 2024 – NO EXTENSIONS

PLEASE TYPE OR PRINT LEGIBLY – ONE APPLICATION PER STUDENT

APPLICANT'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

BEST FAMILY DAYTIME PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

All information on this application is true to the best of my knowledge. **MUST BE SIGNED TO BE VALID!**

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Applicant's father, mother, stepparent, grandparent or legal guardian must be a member of The Moose in good standing. Applicant is not required to reside in same household.

(Please check one)

Father \_\_\_\_\_ Stepfather \_\_\_\_\_ Grandfather \_\_\_\_\_ Legal Guardian \_\_\_\_\_ Mother \_\_\_\_\_ Stepmother \_\_\_\_\_ Grandmother \_\_\_\_\_

NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

BEST DAYTIME PHONE: \_\_\_\_\_

MEMBER ID#: \_\_\_\_\_ LODGE NAME: \_\_\_\_\_ LODGE #: \_\_\_\_\_

*I verify the above member is in "Active" status*

ADMINISTRATOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**This section must be completed in full by a high school official. Please type or print legibly. Transcript not required.**

APPLICANT MUST MEET THE FOLLOWING REQUIREMENTS TO BE ELIGIBLE:

- Be a Senior
- Have a cumulative grade point average of 2.5 or higher on a 4.0 scale (If school uses other grading system, student must have a C+ or better)

Is applicant a Senior: Yes \_\_\_\_\_ No \_\_\_\_\_ If school uses 4.0 scale, applicant's GPA is : \_\_\_\_\_ /4.0

**OR** applicant's letter grade average is: A+ \_\_\_\_\_ A \_\_\_\_\_ A- \_\_\_\_\_ B+ \_\_\_\_\_ B \_\_\_\_\_ B- \_\_\_\_\_ C+ \_\_\_\_\_

Name of High School: \_\_\_\_\_ Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Contact Number: \_\_\_\_\_

School official to contact with questions (Name) \_\_\_\_\_ Title: \_\_\_\_\_

School official completing this section (Name): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WINNERS WILL BE NOTIFIED AFTER THE 2023 MID-YEAR CONFERENCE

MAILING ADDRESS: PENNSYLVANIA MOOSE ASSOCIATION  
CINDY SCHILLING, SECRETARY  
408 W HORNER STREET #17  
EBENSBURG, PA 15931  
TELEPHONE: (814) 244-5127