



Rotary Scholarship Program
Service Above Self

Scholarship Application

Must be postmarked by April 15.

Name: _____ Date of Birth: _____

Address: _____

Cell: _____ Email Address: _____

High Schools and/or College Attended:

Name of School Dates Attended From/To

Name of School Dates Attended From/To

Name of School Dates Attended From/To

Date will graduate HS: _____ Number in HS Class: _____ Rank in HS Class: _____

Weighted GPA graduate HS: _____ Unweighted GPA graduate HS: _____

Student's Signature

Date



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SCHOLASTIC

Honors, Awards & Distinctions Received (Year and Nature of Award):

Office and Positions of Leadership (Organization, Position, Year):

Member of Organization (Where no office was held):

EXTRA CURRICULAR

Honors, Awards & Distinctions Received (Year and Nature of Award):

Office and Positions of Leadership (Organization, Position, Year):

Member of Organization (Where no office was held):

Student's Signature

Date



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EMPLOYMENT

Place of Employment: _____

Address: _____

Job Title: _____ Supervisor Name: _____

Start Date: _____ End Date: _____

Average number of hours worked per week: _____

Place of Employment: _____

Address: _____

Job Title: _____ Supervisor Name: _____

Start Date: _____ End Date: _____

Average number of hours worked per week: _____

COLLEGE

Which Colleges, Universities or Post-Secondary Institution have you applied?

Which College do you plan to attend? What is your intended Major?

When do you plan to start?

Student's Signature

Date



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FAMILY INFORMATION

Name of Parent or Guardian (Indicate which): _____

Address (if not the same as your home address): _____

Cell Phone: _____ Email: _____

Occupation: _____ Employer: _____

Name of Parent or Guardian (Indicate which): _____

Address (if not the same as your home address): _____

Cell Phone: _____ Email: _____

Occupation: _____ Employer: _____

Brothers and Sisters (List in order, including self), starting with eldest:

Name	Age	In School? Where?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I affirm that the information given on this application is complete and correct to the best of my knowledge.

Student's Signature

Date



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PROJECTED BUDGET FOR NEXT SCHOOL YEAR

Estimated Receipts:

Scholarships:

Amount

Source

1.

2.

3.

4.

Loan(s):

Summer Earnings:

School Year Earnings:

Florida Pre-Paid:

Other Income:

Funds from Parents or Guardians: _____

Funds from relatives or friends: _____

Other Sources: _____

TOTAL RECEIPTS: _____

Estimated Costs:

Tuition:

Room & Board:

Books & Supplies:

All Other Expenses:

TOTAL COST: _____

Student's Signature

Date



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Additional details may be attached.

Question #1: How will your college experience prepare you to achieve your life goals?

Question #2: Please provide details of community service you performed and what the service has taught you.

Question #2: What is your opinion of Rotary's "4-Way Test"?

Student's Signature

Date