

## VINITA ROTARY FOUNDATION SENIOR ROTARIAN SCHOLARSHIP APPLICATION

Deadline: [May 4, 2017](#)

APPLICATION MUST BE TYPED

LAST NAME:	FIRST NAME:	MI:
ADDRESS:	CITY:	ZIP:
SSN:	DOB:	
FATHER/GUARDIAN NAME:	EMPLOYER:	
MOTHER/GUARDIAN NAME:	EMPLOYER:	
Where do you plan to attend college?		
Have you been admitted to college?	(check one)	Yes      No
Month/Year you plan to attend college?		
Probable college major:		

Favorite School Activities:	Offices Held	Year

Community Service Activities:	Sponsor	Year

Most Recent Employment:	Dates	Hours per week

List Other Scholarships and College Financial Aid Awarded to You:
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LIST FAMILY DEPENDENTS NAMES & AGES REPORTED ON FAMILY FEDERAL INCOME TAX FORMS:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LIST ANY CONDITIONS OR SITUATIONS WHICH MAY CAUSE A FINANCIAL HARDSHIP TO YOUR FAMILY:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*\*PLEASE ATTACH AN EXTRA SHEET CONTAINING A 200 WORD (OR LESS) TYPED ESSAY EXPLAINING HOW YOU HAVE PARTICIPATED IN AS WELL AS BENEFITTED FROM THE SR. ROTARIAN PROGRAM.**

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Signature of Parent/Guardian

FOR OFFICE USE ONLY:

STUDENT GPA: \_\_\_\_\_

CLASS RANK \_\_\_\_\_ OF \_\_\_\_\_

ACT COMPOSITE SCORE: \_\_\_\_\_

SAT SCORE: \_\_\_\_\_ VERBAL: \_\_\_\_\_ MATH: \_\_\_\_\_

STUDENT COUNSELOR COMMENTS:

SIGNATURE OF COUNSELOR:

