

SEDRO-WOOLLEY ROTARY

SEDRO-WOOLLEY COMMUNITY SCHOLARSHIP APPLICATION

Name _____ Age ____ Date _____

Address _____
(Street) (City) (Zip)

Phone (optional) _____ Email (optional) _____

Father's Name _____ Occupation _____

Mother's Name _____ Occupation _____

Number of brothers and sisters being supported by parents _____

Are you working? _____ Full time _____ Part time _____

Is your father or mother a veteran? Yes _____ No _____

To be completed by Guidance Office:

Cumulative G.P.A. (as of 7th semester) _____ **Class Rank** _____

In what school and community activities have you participated?

What leadership experience have you had?

Applying for _____ Community/Technical (2 year) _____ College/University (4 year)
_____ Career School (1- 4 year)

Which college, career school, or university do you wish to attend?

Estimate your expenses and resources for the first year below (required):

RESOURCES

Social Security _____

Welfare/A.F.D.C. _____

Savings _____

Support from parents _____

Estimated total _____

EXPENSES

Tuition and Fees _____

Housing and Food _____

Books/Personal _____

Transportation _____

Estimated total _____

Complete both 1 and 2:

1. Please write a short statement on one of the topics listed below:

Tell about a significant decision you have made in the past year and how it may influence some aspect of your future plans.

- **OR** -

Tell about a goal or challenge you have met, the struggle or difficulties you went through to meet it, and how this may affect your future plans.

2. Please describe in a paragraph or two your career objectives and what you want to accomplish in life.

Please list the name and address of one reference not related to you:

Name

Address

City, State, Zip

Phone

Do you have a parent/grandparent who is a member of a local service club?

No

Yes – Parent (Name _____)

Yes – Grandparent (Name _____)

Club Name

(e.g. Rotary, Soroptimist, Lions, Eagles, Eagles Auxiliary, Masons, American Legion, American Legion Auxiliary, AFSCME (American Federation of State County and Municipal Employees))

I give the Career Center/Guidance Office permission to release my first semester transcript.

(Student Signature)

(Date)

Deadline is 3:00 p.m. February 18th
Late applications will not be accepted.

Mail Complete Application to:

Geoffrey McCann
PO Box 405
Sedro-Woolley, WA 98284