

Rotary Club of Ojai Educational Foundation, Inc.

Career and Technical Education (CTE) Scholarship Application

1. Student Name _____
Last First Middle

2. Address _____
Street Address City/Zip Phone

3. E-Mail _____

4. High School(s) or Home Schooled (9th - 12th grade)

School Name	From	To
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Accumulated GPA (if available): _____

6. In order of preference, list three occupations you might choose for your life's work:

- a. _____
- b. _____
- c. _____

7. List Vocational Schools, unior College, or Colleges you have or will be applying to:

- a. _____
- b. _____
- c. _____

8. Submit two letters of recommendation, one of which must be from a teacher or counselor.
(These letters may cover ability, work habits, leadership, personality and integrity.)

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9. Out of School Activities:

(Employment, Volunteer Civic Activities, Responsibilities, Awards or other evidence of Motivation and Potential for Accomplishment)

During school year (hours per week) _____
During summer vacation (hours per week) _____

10. The Rotary Scholarship Committee would like to get to know you better.

Please submit a brief letter or essay on a separate sheet of paper to help us get beyond the factual data listed in this grant application. We would like to know how this Vocational Scholarship will benefit you.

11. The Rotary Motto is "Service Above Self" (Volunteer service to help others)

Please submit a paragraph to describe how you have practiced the Rotary Motto.

12. I certify that I am not the child or grandchild of a member or honorary member of the Rotary Club of Ojai or the Rotary Club of Ojai West.

Signature of Student Applicant: _____

Date: _____

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Parents' Confidential Statement**

1. Student Name _____
Last First Middle

2. Address _____
Street City Zip Phone

3. Date of Birth _____ Sex _____ Married? _____

4. Applicant normally lives with : () both parents () mother () father () Other

5. "FAFSA" (Free Application for Federal Student Aid)
A "FAFSA" form is required with your application to evaluate financial need.
Sensitive data such as Social Security number can be blacked out, if desired.

6. Father or male guardian:

Name _____
Home Address _____
Name and address of employer _____

Nature of business _____
Position _____

7. Mother or female guardian:

Name _____
Home Address _____
Name and address of employer _____

Nature of business _____
Position _____

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8. Cash needs known at this time:

Resident () Day student ()
 Married () Single ()

First Year School

Tuition & Fees _____
 Room & Board _____
 Books & Supplies _____
 Other Expenses _____

***Total** \$ _____ -

9. Financial resources for education known at this time:

Siblings:

First Year School

Age	College	Scholarship(s) total	_____
_____	_____	From parent income	_____
_____	_____	From parent savings	_____
_____	_____	From applicant income	_____
		From applicant savings	_____
		From grandparents, others	_____
		Loans, student, others	_____

Total resources available: \$ _____ -

Parent Signature _____ Date _____

Parent Signature _____ Date _____

***Please Review with counselor**