## Scholarship Application



PERSONAL INFORMATION								
Full Name:								
Date of Birth:								
Email:		F	Phone:					
Mailing Address:								
City:		State		Zip C	Code			
CURRENT HIGH SCHOOL:  Arlington High School [  POST HIGH SCHOOL PLANS:  University Commu	Darrin		High So	chool le Scho		_	High Scho	
FAMILY INFORMATION								
PRIMARY PARENT/GUARDIAN		S	SECONDARY PARENT/GUARDIAN					
Name:		I	Name:					
Email:			Email:					
Phone:		I	Phone:					
SIBLINGS (Please list names, ages, and schools.):								
Name	Age		Schoo	ol				

## Activity Location **Hours Served ACTIVITIES AND LEADERSHIP** Years of Participation Activity Awards/Accomplishments (Optional) 10 11 12 9 9 10 11 12 9 10 11 12 9 10 11 12 ] 10 [ ] ]] [ 12 9 10 11 12 **OTHER HONORS & AWARDS** Tell about a meaningful service, work, or leadership experience.

**COMMUNITY SERVICE AND WORK EXPERIENCE** 

## **FINANCIAL INFORMATION**

Provide your perspective on your personal financial situation and drive to graduate college.
Describe how this scholarship will impact your education.
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## **PERSONAL STATEMENT**

How will your individual background, experience influence your education?	s, and personal identity
Don't forget to attach two letter	s of recommendation -
Don't forget to attach two letter one from a teacher, and one from	
I ATTEST ALL THE INFORMATION PROVIDED WITH THIS ATTRUE. I UNDERSTAND IF AWARDED A SCHOLARSHIP FRARLINGTON, AWARDED FUNDS WILL BE SENT DIRECTLY FAILURE TO ATTEND WILL RESULT IN FORFEITURE OF A	OM THE ROTARY CLUB OF Y TO MY SCHOOL OF CHOICE.
Signature:	Date:
Parent/Guardian Signature (if applicable):	Date: