Scholarship Application



PERSONAL INFORMATION				
Full Name:				
Date of Birth:				
Email:		Phone:		
Mailing Address:				
City:	Sta	ate	Zip Code	
CURRENT HIGH SCHOOL: Arlington High School POST HIGH SCHOOL PLANS: University Commu	Darringto	on High S	chool Weston High School	
FAMILY INFORMATION				
PRIMARY PARENT/GUARDIAN		SECONDARY PARENT/GUARDIAN		
Name:		Name:		
Email:		Email:		
Phone:		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) **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, experiences, and personal identity influence your education?			
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:		