

2025 LOCKPORT ROTARY CLUB SCHOLARSHIP APPLICATION



REMINDERS: (1) PLEASE TYPE OR PRINT NEATLY AND LEGIBLY THE REQUESTED INFORMATION. (2) THE COMPLETED APPLICATION IS DUE TO YOUR GUIDANCE DEPT. BY WEDNESDAY, 2/12/25, AT 2:30PM. (3) CALL (716) 261-8231 WITH QUESTIONS.

Full Name of Applicant: _____
First Middle Last

Home Address: _____
Street City State Zip

Cell Phone #: _____ Alt Phone #: _____

Email Address: _____

With Whom do you live? _____

Father's Name: _____ Living Deceased

Father's Employer: _____ Occupation: _____

Mother's Name: _____ Living Deceased

Mother's Employer: _____ Occupation: _____

Name of Guardian if other than parent: _____ Relationship: _____

Check One:

This application is for an academic pursuit (4 yr. program). Intended major or field of study: _____

This application is for a vocational pursuit (2 yr. program). Intended field of study or training: _____

Institution Choice :1) _____ 2) _____ 3) _____

Interview scheduling: If you are selected, please indicate the time period which you would prefer for a 15-minute interview

on **Wednesday, March 19, 2025:** 4:00-5:00pm 5:00-6:00pm 6:00-7:00pm

Please list the name, relationship, and address of three people (include only **one** teacher) who can speak authoritatively about your character, personality and abilities. **Attach a letter of recommendation from each reference to your application.**

Name:	Relationship:	Address:

On a separate printed page (or pages) attached to your application and marked with your name, please respond to the following four (4) requests for background information:

1. List your participation in extra-curricular high school and community activities and indicate any leadership positions in which you have served. Indicate those in which you have obtained a letter, other awards, recognition, or if you have served as an officer.
2. Describe any employment experience you have had.
3. List any additional scholarships, honors, or special recognition you have received.
4. In essay form on a separate page (or pages), please respond to the following question: ***“What personal experiences reinforce your intention to obtain a college education or advanced vocational training?”***

Name of applicant: _____

My Plan to Meet Yearly Academic Expenses

Note: Please complete the tables below only to demonstrate that you have an understanding of your potential education expenditures (cost) and the revenue (resources) necessary to be financially responsible. Scholarship awards will be made based upon personal attributes and achievements, **not** financial need.

Projected Expenditures:

	Institution #1	Institution #2	Institution #3
Institution Name:			
Tuition			
Fees			
Books			
Room and Board			
Recreation			
Laundry			
Clothes			
Transportation			
Miscellaneous			
TOTAL			

Projected Resources:

Source of Funding	Amount
From parents/guardian	
From relatives or friends	
Gifts	
Loans	
Net savings of my own	
Scholarships received	
Scholarships anticipated	
Employment during the summer	
Employment while at school	
Other	
TOTAL	

We are in agreement with the plan to meet yearly academic expenses:

Student's signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Name of applicant: _____