2026 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, 2/11/26, AT 2:30PM. (3) CALL (716) 261-8231 WITH QUESTIONS.



Full Name of Applicant:					
	First	Middle	Last		
Iome Address:					
#	Street	City		State	Zip
Cell Phone #:		Alt Phone #:			
mail Address:					
With Whom do you live?					
ather's Name:				Living	Deceased
ather's Employer:				Occupation:	
Nother's Name:				Living	Deceased
Nother's Employer:				Occupation:	
Name of Guardian if other th	nan parent:			Relationship:	
Check One:					
This application is	s for an academic purs	suit (4 yr. program). Ir	ntended major or	field of study:	
This application is	s for a vocational purs	uit (2 yr. program). In	tended field of st	udy or training:	
Institution Choice:1)		2)		3)	
nterview scheduling: If you	are selected, please in	ndicate the time perio	nd which you wou	ld prefer for a 15-minute i	interview
•	resday March 24 2026	·	•	•	

Name:	Relationship:	Address:	
On a separate printed page following four (4) requests for	, , , , , , , , , , , , , , , , , , , ,	on and marked with your name, please respo	nd to the
	ved. Indicate those in which you have	nmunity activities and indicate any leadership obtained a letter, other awards, recognition,	•
2. Describe any employm	nent experience you have had.		
3. List any additional sch	olarships, honors, or special recognition	you have received.	
	arate page (or pages), please respond to obtain a college education or adva	d to the following question: "What personal exnced vocational training?"	(perience:
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, <u>not</u> financial need.

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

Projected Resources:

riojecica kesoorees.	
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	

Name of applicant:	
Parent/Guardian Signature:	Date:
Student's signature:	Date:
We are in agreement with the plan to meet yearly acader	mic expenses: