

Rotary is an international service organization comprised of professional and business leaders whose goals are humanitarian service, high ethical standards, promotion of goodwill and peace around the world, and the development of leadership skills. The motto of Rotary is "SERVICE ABOVE SELF." The Grapevine Rotary Club was chartered in June 1967.

As part of our service to the community and to fulfill our responsibility to support leadership and service learning opportunities for our youth, during 2016-2017 the President's Leadership Grant was created. This potential grant of up to \$3,000 is available to graduating seniors who are children of members of the Grapevine Rotary Club. Availability of this award is not guaranteed but awarded when available in the Rotary calendar year budget.

### **Eligibility Criteria:**

- A Grapevine Rotarian's child or grandchild, who lives with the Rotarian.
- · Applicants must be high school seniors.

#### **Judging Criteria:**

- Interact Club and/or Rotary Youth Leadership Academy (RYLA) experience
- Leadership
- Community Service
- Academic Performance/Potential
- · Personal Goals
- Financial Need

### **Application Components:**

Fill in the application form completely. All questions must be answered.

- · Must include full address including zip code
- · Must include total family size
- Must include other grant/scholarship information
- Two letters of recommendation: One from a teacher or administrator and one from an Interact Sponsor, RYLA Counselor, community leader, work supervisor, minister, etc.
- Must be completed and returned to Grapevine Rotary Club, P. O. Box 103, Grapevine, Texas 76099 by midnight Sunday, June 30, 2024.

### **Student Profile**

| Name of Applicant —   |  |  |
|---|--|--|
| Parent/Guardian's Name(s)   |  |  |
| Address/City/Zip  |  |  |
| Telephone E-mail  |  |  |
| Name of High School ———————————————————————————————————                                 |  |  |
| Expected Date of Graduation Expected Date of College Enrollment                         |  |  |
| GPA, out of a scale   |  |  |
| List three colleges, universities or higher education institutions you are considering: |  |  |
| 1   |  |  |
| 2.  |  |  |
| 3.  |  |  |
| s.  |  |  |
| Where have you been accepted?   |  |  |
| Anticipated major field of study?   |  |  |
| Why have you chosen this field of study?  |  |  |
| Have you attended RYLA? Year attended?  |  |  |
| Have you been a member of Interact? Length of service?                                  |  |  |
| Who in your family is a Rotarian and the Rotarian's relationship to you?                |  |  |

### **Narrative:**

Directions: Answers must be completed on this form ONLY (other than letters of recommendation). No additional attachments will be considered.

| 1. Please provide the areas of leadership and Service Above Self projects which you have accomplished through your experiences. |
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|   |
| 2. List the ways in which you have helped others through your volunteerism and community service:                               |
|   |
|   |
|   |
| 3. What three personal attributes do you think will help you succeed and achieve your goals?                                    |
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|   |
|   |
| 4. Describe your educational goals:   |
|   |
|   |
|   |
| 5. Describe your work history:  |
|   |
|   |
|   |

| 6. Describe your extracurricular involvement (journal  | alism, debate, band, athletic, etc.)  |
|--|---|
|  |   |
|  |   |
|  |   |
| 7. Describe any special circumstances that may affe  | ect your family's ability to pay for college.                                   |
|  |   |
|  |   |
| 8. Please describe your family profile. Include who  | you live with and members of your family.                                       |
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|  | _   |
|  |   |
| 9. Provide any additional information you would like Leadership Committee to consider: e.g., an accompany challenges you may have faced, and how you have faced.   | olishment of which you are proud,   |
|  |   |
|  |   |
| I, hereby certify that the foregoing statements are t<br>knowledge and belief. I understand that any false s<br>considered sufficient cause for rejection of this app<br>such false information is discover subsequent to re | tatements on this application may be lication or for revocation of the grant if |
| Student's Signature  | Date:   |
| Parent/Guardian's Signature  | Date:   |
| Parent/Guardian's Signature  | Date:   |
| School Counselor's Signature   | Date:   |