



**TEXAS CITY ROTARY FOUNDATION, INC. SCHOLARSHIP
FRANK WEBB TRUST SCHOLARSHIP
LEE AND ELLEN OWENS SCHOLARSHIP**

The Rotary Club of Texas City offers scholarships through their local Rotary Foundation including a Memorial Scholarship in honor of Lee and Ellen Owens and the Frank Webb Foundation to students based on their financial need, academic and extracurricular/service activities. Scholarships range from one-time \$2,000 to renewable awards for \$2,000 for up to five years based on criteria from the Texas City Rotary Club. Students with family members in the Rotary Club of Texas City do not qualify.

Personal Information

Name: _____ Phone Number: _____

Address: _____

Email: _____

Family Information

Number of people living in household: _____ Number of people under the age of 19: _____

Total household income before taxes:

____ Less than \$25,000 ____ \$25,000-\$34,999 ____ \$35,000-49,999 ____ \$50,000-\$74,999

____ \$75,000-\$99,999 ____ \$100,000-\$149,999 ____ \$150,000-\$199,999 ____ \$200,000 or more

How many family members will be attending college in the next four years? _____

Academic Information

High School Grade Point Average: _____ (Please attach a copy of your high school transcript.)

Class Rank: _____ out of _____ (number in class)

College you plan to attend: _____

Planned course of study: _____

Extracurricular Activities: Please list the years of involvement for each organization/club during your time in high school.

Honors and Awards: (High School years only)

Community Service: Describe your community service projects during your four years of high school and indicate approximately how much time you spent on each project.

Work Experience: List any jobs you have had during high school and include your responsibilities.

Essays: Please answer both essays. They must be typed in 12-point font and no longer than one page per essay.

Essay 1: How will this scholarship impact you the most?

Essay 2: Rotary’s motto is “Service Above Self.” What does this mean to you?

Student Certification: I hereby affirm that all information provided in this application is accurate.

Signature of Applicant

Date

*You may attach a résumé or other documents you wish to be considered with the application.
Completed application is due to the Counselor’s Office no later than March 26, 2021.
Information provided is confidential and will be treated as such.*