Foxboro Rotary Club

P.O. Box 321

Foxboro, MA 02035

Scholarship Application Form

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School Attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of Graduation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please answer the following questions. Your answers and this application are confidential to the Rotary Scholarship Committee and will not be shared. Completed applications must be e-mailed (preferred) to bquinn3349@icloud.com. If you mail your application, please use additional paper clearly labeled with your name to the above address. All applications are requested by June 25th.

* What educational program you are planning to pursue? Have you been accepted into a post secondary program?
* Describe how you have demonstrated the Rotary ideals of community service and ethical behavior. Letters of reference are welcome but must be received by the application deadline.
* Describe your financial need for this grant. As most programs will require more resources then this grant can provide, please identify how you intend to meet your financial commitments.
* Please feel free to provide any additional information you believe may help this committee better merit your application.