THE ROTARY CLUB OF FALMOUTH

P. O. Box 293 Falmouth, MA 02541

2019 scholarship application for entering college juniors

To qualify, you must be from Falmouth and entering your junior year enrolled in a program leading to a bachelor's degree at an accredited college or university.

Please complete all questions on this application in your own handwriting. Any questions you have may be directed to the Scholarship Chairman at w.f.phillips@att.net College transcripts may be sent to the same Email address. It is suggested that you give the recommendation forms and SASE to the people you chose to write on you behalf in ample time for them to meet the application deadline.

FULL NAME		TELEPHONE #				
<u>MAILING</u> ADDRI	Email Addres	s				
BIRTHDATE/_	/ HIGH S	SCHOOL			YR. GRAD	
EDUCATION SING Name of School		Dates Attended	, and the second		Degree/Date Received	
WHERE WILL YO						
Name of College or						
Major	Degree AnticipatedYear				_Year	
Annual Tuition	Room @	& Board	Tota	l Annual Cost_		
Describe ALL finan	cial aid in detail (So	cholarships/Grants	/Loans, etc.)			
Breakdown of Colle	ege Expenses					
Parents	You	Grants	Loans	Other	Total	
Year 1	_++_	+_	<u>.</u>	+	=	
Year 2	_++	+_		+	=	
Year 3*	_++	+_	<u>.</u>	+	=	
Year 4**Estimates		+_		+	=	

School and Community Activate	'S		
Employment during and since H	igh Scho	ool	
Family Information			
Father's Name	ther's Name Mother's Name		
Employment	Employment		
Position		Position	
Other dependents:			
Name	Age		Employment
		_	y: May 22nd, 2019
			<u>L</u> COLLEGE TRANSCRIPTS
3. TWO (2) LETTERS O	F REC	OMMENDATION (SE	NT SEPERATLY)/_
		OUT YOU AND YOUR in your own handwritin	FINANCIAL NEED FOR THIS
5. COPY OF COLLEGE FOR YOUR JUNIOR			YOU ARE TRANSFERRING
To the best of my knowledge al	ll of the	above information is tr	ue and correct.
Signature of Applicant			Date
Note: Winner will be announced	lon or al	yout July 1st 2019 on the	club website and in the local press

THE FALMOUTH ROTARY CLUB JUNIOR YEAR SCHOLARSHIP AWARD RECOMMENDATION

This recommendation is for_____

Briefly state why you feel this candidate quaextra sheet or use your own form.)	alifies for the scholarship. (You may attach an
The level of the state of the s	
How long have you know the applicant?	yrs.
In what capacity?	
Name	Position
Signature	Date
Address	
Telephone #	
Please return by May 22nd, 2019	to: Scholarshin Chairman
rease return by May 22nd, 2017	ROTARY CLUB OF FALMOUTH
	P. O. Box 293
	Falmouth, MA 02541

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i icase return by may 22m	1 2019 to: Scholarship Cha	all'illali Of fax Molye

Please return by May 22nd 2019 to: Scholarship Chairman
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