

**ROTARY CLUB OF KONA COMMUNITY FOUNDATION**  
**Ken and Marge Clewett Scholarship Application**

We are looking for an individual that has during high school placed an emphasis on community service with a sincere desire to attend an accredited post-secondary institution (i.e. college, university, community college, vocational or trade school.) Candidates must be a graduate by June 2019 of a West Hawaii High School such as from Kealakehe High School, Konawaena High School, West Hawaii Explorations Academy and Makua Lani Christian High School. This scholarship program is administered without regard to race, creed, color, age, religion, sex, national origin or physical disability.

The scholarship award is \$8,000 over four years (\$2,000 per year); renewable each year up to four years of undergraduate study, or until graduation, whichever comes first. Scholarship funds may be used for any educational expenses such as tuition, fees, books, and supplies. Scholarships funds are non-transferable and will be paid directly to the school of choice in the recipient's name.

Recipients must take a minimum of three-quarters of a full course load and must maintain a grade-point average of 2.5 to remain qualified.

**Selection Criteria**

1. Community Service and Activities
2. Scholastic and Academic Achievement
3. Leadership, personal involvement on campus
4. Extracurricular Activities, Employment Experience
5. Financial Need

**Application Procedure**

1. Complete the personal and financial aid information requested on the attached page.
2. Write a short essay (no more than 2 typed written pages) summarizing your achievements in the first four criteria above. Include an explanation of your educational/vocational plans as well as your future plans upon completion of this program.
3. Submit two (2) recommendation letters for scholarship, one (1) from a current faculty member and one (1) from a member of your community (not another student).
4. Attach a certified copy of your transcript.
5. Mail this completed information, by March 29, 2019 to the address below.  
Finalists will be contacted for an interview

**Mail to:            ROTARY CLUB OF KONA COMMUNITY FOUNDATION**  
**Community Foundation Scholarship Review Committee**  
**P. O. Box 3570, Kailua-Kona, HI 96745**

**ROTARY CLUB OF KONA COMMUNITY FOUNDATION**  
**Ken and Marge Clewett Scholarship Application**

To be completed by the Student Applicant:

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_

HOME ADDRESS (If Different): \_\_\_\_\_

HOME TELEPHONE # \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_

DATE OF HIGH SCHOOL GRADUATION: \_\_\_\_\_

NAME OF COLLEGE/UNIVERSITY, VOCATIONAL SCHOOL YOU PLAN TO ATTEND: \_\_\_\_\_

FINANCIAL AID DATA: To be completed by the Parent(s)/Guardian(s)

Father/Guardian

Mother/Guardian

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ MAILING ADDRESS: \_\_\_\_\_

HOME ADDRESS: (If Different) \_\_\_\_\_ HOME ADDRESS: (If Different) \_\_\_\_\_

NAME & ADDRESS OF EMPLOYER: \_\_\_\_\_ NAME & ADDRESS OF EMPLOYER: \_\_\_\_\_

POSITION: \_\_\_\_\_ # YRS \_\_\_\_\_ POSITION: \_\_\_\_\_ #YRS \_\_\_\_\_

GROSS INCOME: \_\_\_\_\_ GROSS INCOME: \_\_\_\_\_

NATURE OF BUSINESS: \_\_\_\_\_ NATURE OF BUSINESS: \_\_\_\_\_

List names of Children	Ages:	Name of school/occupation	#Years	Living w/you?
------------------------	-------	---------------------------	--------	---------------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

Do any of the above receive scholarships or receive gift in-aid for school? If so, which children and from whom? \_\_\_\_\_

---

**ROTARY CLUB OF KONA COMMUNITY FOUNDATION**  
**Ken and Marge Clewett Scholarship Application**

RECOMMENDATION LETTER

Name of Applicant: \_\_\_\_\_

Proposed Area of Study: \_\_\_\_\_

1. How well, how long, and in what capacity have you known the applicant?

---

---

---

---

---

2. In your opinion, how firm is the applicant's commitment to his/her proposed field of study?

---

---

3. In comparison with other students whom you have known at a comparable age, how would you rate the applicant in the following areas? If you are unable to evaluate in an area, please leave it blank.

	Excellent	Very Good	Average	Below Average
Leadership	_____	_____	_____	_____
Initiative	_____	_____	_____	_____
Enthusiasm	_____	_____	_____	_____
Adaptability	_____	_____	_____	_____
Maturity	_____	_____	_____	_____
Emotional Stability	_____	_____	_____	_____
Public Speaking	_____	_____	_____	_____
Seriousness of purpose	_____	_____	_____	_____

4. Give examples of how this applicant has been involved in community service: \_\_\_\_\_

---

---

5. In your judgment, how critical is the scholarship to the applicant? \_\_\_\_\_

---

---

---

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Institution (if applicable) \_\_\_\_\_