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 2021 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 April 10, 2021 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

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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 GRA	ADUATION:				
NAME OF COLLEGE/UNIVER	RSITY, VOCATIO	NAL SCHOOI	L YOU PLA	N TO ATTEND:	
FINANCIAL AID DATA: To b	e completed by the	Parent(s)/Gua	rdian(s)		
Father/Gu	ardian_	Mother/Guardian			
NAME:		NAME:			
MAILING ADDRESS:		MAILING ADDRESS:			
HOME ADDRESS, (If Different	.+\	HOME ADD	DECC. (If D	iffament)	
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NAME & ADDRESS OF EMPL	NAME & ADDRESS OF EMPLOYER:				
POSITION:	# YRS	POSITION:		#YRS	
GROSS INCOME:		GROSS INCO	OME:		
NATURE OF BUSINESS:		NATURE OF BUSINESS:			
List names of Children Ages:	Name of school	l/occupation	#Years	Living w/you?	
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			-		
Do any of the above receive schofrom whom?	olarships or receive	gift in-aid for	school? If so	o, which children a	

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RECOMMENDATION LETTER

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		Title:	
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