ROTARY SCHOLARSHIP* FOR WINDSOR RESIDENTS

\$2000.00 (\$1000.00 awarded in 2020; \$1000.00 awarded in 2021)

Requirements:

To be eligible, the applicant must be:

- a graduating high school senior and a resident of Windsor, Connecticut,
- involved in community service, e.g., in school, the community, church, etc., and,
- interested in a career in community or public service (including but not limited to such fields as education, social services, healthcare, the environment, information technology, law, government, or social justice).

Deadline:

Applications must be postmarked on or before May 1, 2020.

Questions:

Direct any questions to Tim Grant at mothygra@aol.com .

Application Checklist:

Review the list below before mailing to assure that all required documents are included:

- Complete the attached 4-page application. Have your Guidance Counselor complete the *Counselor Use Only* box of the application.
- Attach your high school transcript
- Include one letter of recommendation (in a separate sealed envelope) from a teacher, counselor, or a supervisor who is knowledgeable about one of your community service activities. The person writing the recommendation may choose to send the letter (**postmarked by May 1**st) directly to Tim Grant (see below for address).

Mail application materials to:

Tim Grant 28 Day Hill Road Windsor, CT. 06095

*Funded by the Rotary Club of Windsor Charitable Fund

ROTARY SCHOLARSHIP APPLICATION FOR WINDSOR RESIDENTS - Class of 2020

Type or Print in Black Ink. Complete all items: the Optional Item on the last page is not required.

Applicant Name: Last		First	MI
Home Address:			Phone:
I plan to attend(College or Univ	versity)	in(State)	Major in (Intended Major)
Please check the following:			
I plan to: Board I ha	ave already appl	ied:	have been accepted: \square Yes
☐ Commute		□ No	□ No
			☐ Waiting to hear
FAFSA (Free Application for Stude	ent Aid) has been	filed: \square Yes \square N	No
Expected Family Contribution (EFC	C) according to F	FAFSA: \$	Family Savings for Education: \$
Parent/Guardian Occupations: Fat	her		Mother
Give the first name and age of siblin currently enrolled in college full tim			for support at this time. Please indicate if they are attending:
List Senior Year Courses, Level a	nd 1 st Semester	Final Grades	Counselor Use Only*
Course Name	Level	1 st Sem. Grade	SAT Scores:
			Critical Reading
			Writing
			ACT Composite
			Rank at End of 7 Semesters/
			G.P.A. at End of 7 Semesters
			Cost of Attendance: \$
			Counselor's verification that all information is accurate:
		Date	(initials)
Student Signature			Date

Parent Signature

^{*}Parent signature is a release that allows the Guidance Department to provide this information to the Scholarship Committee.

3	Applic	ant Name:
2	Honor	s/Awards Received (including date received):
2	1.	
3		
3	2.	
Community Service Organizations/Activities (including dates): 1	2	
Community Service Organizations/Activities (including dates): 1	3.	
1	4.	
1		
2	Comm	unity Service Organizations/Activities (including dates):
2	1.	
3		
3	2.	
4		
5	3.	
5	4.	
Athletics (including dates): 1 2		
1. 2.	5.	
1. 2.		
2.	Athleti	cs (including dates):
	1.	
	2.	
2	2	
3	3.	
4	4.	

ant Name:
nunity Activities/Service (including dates):
yment (including dates):
sts/other related information you wish to share with the Scholarship Committee:
rships that you have already been awarded and their amounts:

Applicant Name:			
Select one of the Community Service/Activities you listed above and describe why you decided to become involved in it. Description should be 250 words or less.			
OPTIONAL: Describe any additional circumstances affecting your school work and/or family financial status.			