

WARRINGTON ROTARY CLUB FOUNDATION

SCHOLARSHIP GUIDELINES

1. Scholarships, if awarded, shall be given first to any high school senior living in, or adjacent to, Warrington Township, Bucks County, PA. The student shall be in good academic standing and enrolling in a two or four year college or university program or a vocational school or a trade school as a full time student. Since the Warrington Rotary Club is a **SERVICE ORGANIZATION**, it is seeking applicants who are active in community service. Therefore, the applications will be reviewed with special emphasis and consideration given to applicants with an explicit written history of **community service**.
2. The scholarships shall be called "**The Warrington Rotary Club Community Scholarship**"
3. Applications shall be reviewed by the Warrington Rotary Club Foundation Committee, and their majority vote shall determine the recipient and amount of the scholarship to be awarded.
4. The review of the Scholarships shall consist of the following factors:
 - Applicant lives in Warrington, Warminster, Warwick, Doylestown and New Britain Townships, Bucks County, Pennsylvania
 - A completed application
 - An explicit written history of the applicant's active involvement in and time commitment to community service
 - Recommendation of the High School's guidance department
 - Need or non-need basis
 - The applicant's class standing
 - Personal interview may be required
 - Application shall be complete and signed by the applicant

APPLICATION FOR THE WARRINGTON ROTARY CLUB COMMUNITY SCHOLARSHIP

THOSE ELIGIBLE:

Any high school senior living in or adjacent to Warrington Township and in good academic standing who is enrolling in a two or four year college or university program or a vocational school or a trade school as a full time student.. Since the Warrington Rotary Club is a service organization it is seeking applicants who are active in COMMUNITY SERVICE. Therefore, the applications will be reviewed with special emphasis and consideration given to applicants with an explicit written history of community service.

SCHOLARSHIP AMOUNT:

Five hundred to one thousand (\$500-\$1000) made payable to the college or university in which you will be enrolled.

APPLICATION PROCEDURE:

- This application **MUST BE** fully completed and submitted **to your school Guidance Department by April 30.**
- Verification of information and screening of applications by school Guidance Department.
- Review of applications by Warrington Rotary Club Foundation Scholarship Committee.
- Interview of finalists by Warrington Rotary Club Scholarship Committee – if requested.
- Notification of award to successful applicant.

CONFIDENTIALITY:

All information contained within this application will be kept confidential except for those persons designated to conduct the review and award the scholarship.

Date: _____

PERSONAL DATA

APPLICANT'S NAME _____ (Print) _____ (Signature)

ADDRESS _____

PHONE (cell) _____

FATHER'S NAME _____

MOTHER'S NAME _____

PARENT'S ADDRESS _____
(If different than students)

PARENT'S and/or STUDENTS e-mail address _____

HIGH SCHOOL _____

CLASS RANK _____ OUT OF _____ TOTAL STUDENTS

ACTIVITIES, AWARDS, HONORS - (SCHOOL – GRADES 9, 10, 11 & 12)

LIST COMMUNITY SERVICE ACTIVITIES (GRADES 9, 10, 11 & 12)

- *Provide an explicit written history of your active involvement in and time commitment (including total hours) that you provided for community service. (List on separate sheet of paper and attach to application, if needed)*

COLLEGE, UNIVERSTIY, VOCATIONAL OR TRADE SCHOOL INFORMATION

COLLEGE/SCHOOOL YOU PLAN TO ATTEND _____

EXPECTED MAJOR _____ EXPECTED DEGREE _____

FUTURE VOCATIONAL GOALS _____

APPROXIMATE YEARLY COST: TUITION _____

ROOM & BOARD _____

TOTAL _____

FINANCIAL

HAVE YOU BEEN OFFERED ANY OTHER SCHOLARSHP AID? _____

FROM WHOM? _____ TOTAL AMOUNT _____

HAVE YOU APPLIED FOR ANY OTHER SCHOLARSHP AID? _____

FROM WHOM? _____ TOTAL AMOUNT _____

HOW DO YOU PLAN TO PAY FOR YOUR COLLEGE EDUCATION?

(List on separate sheet of paper and attach to application, if needed)

REFERENCES (attach references from :)

COUNSELOR _____ PHONE _____

TEACHER _____ PHONE _____

OTHER _____ PHONE _____

OTHER _____ PHONE _____

MEDIA RELEASE FORM MEDIA/PHOTO WAIVER:

Undersigned authorizes and gives full consent to Released Parties to copyright and/or publish for public view any and all photographs, digital recordings, videotapes and/or film in which Participant appears.

Undersigned also agrees that Released Parties may transfer, use, or cause to be used, these digital recordings, photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, television programs, and internet without limitations or reservations.

Participant's Signature _____

Participant's Name (please print clearly) _____ **Date** _____

Parent/Legal Guardian or Representative Signature _____

Parent/Legal Guardian or Representative Name Relationship _____ **Date** _____

ADDITIONAL INFORMATION:

Please provide the following information on a separate sheet of paper.

- Explain the reasons why you would like to receive this scholarship award.
- Explain the reasons why you deserve to receive this scholarship award.