

**Rotary Club of Southington
Continuing Education Scholarship Application Form**

Student Name: _____ Date: _____

High School Graduation Date: _____

Address: _____

Email Address: _____

College Currently Attended: _____

Are You Currently Employed? Yes or No

Summer Employment Hours/Week: _____ Employer: _____

School Year Employment Hours/Week: _____ Employer: _____

Semesters Completed to Date: _____ Anticipated Graduation Date: _____

PLEASE TYPE YOUR RESPONSES TO THE FOLLOWING:

(While in College)

School activities:

Honors or Awards received:

Community Involvement/Volunteering:

Brief comments on your plans upon graduation:

A statement of financial need: