

2021 Scholarship Application Form

Rotary Club of Saginaw Sunrise Foundation

P.O. Box 5724

Saginaw, MI 48603

www.saginawsunrise.org

PURPOSE

- Rotary Club of Saginaw - Sunrise Foundation, Inc. is seeking graduating high school seniors for scholarship award(s) for the 2021-2022 school year. The award will be for \$1,000.00 a year and may be reapplied for up to four years provided recipient meets guidelines for renewal.
- This is a need and merit base award; preference is given to Saginaw Public Schools students attending Saginaw Valley State University or Delta College.
- The purpose of the scholarship is to assist college bound students in obtaining a college education and to promote local and international community service.

SPECIAL GUIDELINES

- High school applicant G.P.A must be at least a 3.0.
- Applicants must verify acceptance at a college or university granting a two-year or four-year degree.
- **Applicants enrolled in a certified Technical Career Training or Trade program are acceptable.**
- The recipient must provide proof of acceptance and enrollment before funds will be dispensed.
- The recipient will receive written notice of acceptance by April 30, 2021.
- All awards will be rendered in the name of the recipient and the college/university.
- Recipient should notify the Rotary Club of Saginaw - Sunrise Foundation Treasurer by **July 1, 2021** with the college/university name and financial aid office address in order to receive the award.

APPLICATION PACKAGE

- Complete and sign the application. Make sure your name appears on all attachments.
- Attach a one-page essay describing your educational goals and financial need (minimum 250 words).
- Attach a copy of your transcript (s) and ACT or SAT Scores with this Scholarship Application.
- Attach a copy of your Admission Acceptance Letter or proof of registration and a copy of your final transcript **(must be received by July 1, 2021)**
- Attach a letter of reference submitted on your behalf by a Teacher or School Administrator.

* **Please sign and return the completed application to:**

Rotary Club of Saginaw Sunrise Foundation

Attn: Treasurer

P.O. Box 5724

Saginaw, MI 48603

DEADLINE: All information must be postmarked by March 30, 2021.

Dedicated to improving the lives of others through educational opportunities and community service

2021 ENTRY FORM
ROTARY CLUB OF SAGINAW SUNRISE FOUNDATION SCHOLARSHIP PROGRAM

Please circle your plans

- I plan to attend a four (4) year college or university.
- I plan to attend a two (2) year certificate program or community college.
- I plan to attend a Technical Career Training Program or Apprenticeship

I. PERSONAL HISTORY

1. Name _____ Gender _____
(Please Print or Type) (First) (Middle) (Last)
2. Home Address _____

(City) (State) (Zip Code)
3. Home Telephone () Mobil Phone ()
4. Email Address _____
5. Date of Birth _____ Current Age _____
6. High School Currently Attending _____
Address _____
School Counselor _____ Telephone ()

II. FAMILY INFORMATION

1. Annual household income: \$ _____ /Year
2. Total number of family members living at home: _____
3. Number of dependents in your parent's home including yourself: _____
Children _____ Ages _____
4. Number of dependents attending college: _____
5. Number of Parents attending College: _____
6. Other financial considerations which need to be noted: _____

III. Extracurricular Activities – Organizations and Clubs: (List the activities that you participate in school.)

IV. Honors and Awards:

V. Community, Church, or Other Volunteer Services:

VI. Work Activities:

Student's Name (Please Print)

Signature

Date

*** Please sign and return the completed application package to:**

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Attn: Treasurer

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Saginaw, MI 48603

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Rotary Club of Saginaw Sunrise Foundation USE ONLY:

PROCESSING INFORMATION

Date Received _____ Received By _____

	YES	NO
Acceptance Letter	_____	_____
Reference Letter	_____	_____
Transcript	_____	_____
Personal Statement/Essay	_____	_____
Application Complete	_____	_____

Institution Name _____

Amount of Scholarship \$ _____

Academic Year of Scholarship or Period _____

Recommendations Approved _____ Denied _____ Date _____

Reviewed by

Check Sent: _____ Check #: _____ Date: _____

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