



Blakeslee Rotary Club  
Scholarship Application  
P.O. Box 3  
Blakeslee Pa 18610

ATTN: SCHOLARSHIP COMMITTEE

**BEFORE COMPLETING THIS APPLICATION FORM, PLEASE READ THE FOLLOWING:**

The Blakeslee Rotary Club will have available (2) \$1500.00 scholarships each year. The club's scholarship committee will determine the recipients of the scholarship award. The following criteria must be met:

1. Students must live in the area served by Pocono Mountain School District, West High School.
2. The student must carry a grade point average of 2.8 or grade of (B) or better to be considered.
3. Selected fields of study are not criteria. The scholarship is available for any student continuing their education beyond the secondary level (i.e., university college, community college, trade school, etc.)
4. **\*\*Scholarships will be paid directly to the student. The student must maintain a "B" average. An official transcript must be provided to the club from the school before payment will be made.**  
**\*\*Please Note: Students will have until the end of their first college year to submit their transcript. Although, if the student maintains their "B" average within the first semester, they may submit the transcript early.**
5. The **official transcript** should be sent to the address above, to the attention of Scholarship Chair  
**(Emails and Unofficial Transcripts will not be accepted)**
6. The Blakeslee Rotary Scholarship Committee will screen applications. The committee will then make recommendations to the Board of Directors.
7. Applications should be submitted by the Guidance Department of the students' school, or in the case of home-schooled students by a parent, to the Scholarship Committee of the Blakeslee Rotary Club, P.O. Box 3, Blakeslee Pa 18610. An official school transcript and two letters of recommendation from a teacher, counselor, or community member (student's choice) must accompany the scholarship application.

**Application Deadline is April 15<sup>th</sup>**

Below is a check list to help improve the application process:

- Application Form
- Letters of recommendation
- Transcript
- Essay

**Please Proceed to the Application**

**APPLICATION DATA**

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Telephone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**SCHOOL DATA**

Elementary School Attended \_\_\_\_\_ Dates Attended \_\_\_\_\_

High School Attended \_\_\_\_\_ Graduation Date \_\_\_\_\_

SAT Total (if taken) \_\_\_\_\_ ACT Score Composite (if taken) \_\_\_\_\_

**POST HIGH SCHOOL DATA**

College / School you plan to attend \_\_\_\_\_

Other Schools/Colleges you have applied \_\_\_\_\_

List Schools Where Accepted \_\_\_\_\_

Planned Field of Study: \_\_\_\_\_

Enrollment Status: \_\_\_\_\_ Full-Time \_\_\_\_\_ Half-Time \_\_\_\_\_ Less Than Half-Time

Indicate Housing: \_\_\_\_\_ On Campus \_\_\_\_\_ Off Campus \_\_\_\_\_ Will Commute

Anticipated School/College Graduation Date: \_\_\_\_\_

Vocational - Objective: \_\_\_\_\_

**PARENT DATA**

Father \_\_\_\_\_ Mother \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

**ACTIVITIES/AWARDS/WORK DATA**

Describe below extracurricular, community, volunteer, and church activities you have participated in during the past four years. Indicate special awards, honors, and leadership experiences. Please use this sheet and do not attach additional paperwork.

Activities	9	10	11	12	Leadership Experience	Office Position	Award/ Honor

**Please list any employment opportunities which you would like us to use in our evaluation.**

Employer	Position/Job Duties	Supervisor	Contact Number

**Please attach a short essay describing a significant experience or accomplishment that has special meaning to you.**  
(Remember an experience or accomplishment is something you have experienced, not an award you have received or the experience of someone else.)

By signing this application, I hereby certify that the information is complete and accurate to the best of my knowledge. My signature indicates my permission to release my information to the scholarship committee. If the student is under the age of 18, please include a signature of a parent or guardian.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return the completed application to the address listed above.  
Deadline for applications is also listed above.**