



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 have an overall cumulative grade point average placing the student in the upper one-third of their graduating class.
3. Selected fields of study are not criteria. The scholarship is available for any student continuing their education beyond the secondary level.
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 particular 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 15th

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.**