



# Rotary Club of Key Largo

## CONTINUING ADULT EDUCATION & VOCATIONAL SCHOLARSHIP APPLICATION

Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City / State/ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_

Please answer all questions completely and fill out the attached form. You may include a separate sheet with any additional information relevant to this scholarship request. Please ensure the signature of your Parent(s) or Guardian is included on this form if applicable.

- 1) How long have you lived in the Florida Keys?
  
- 2) What are your educational goals and career objectives?
  
- 3) How do you envision your future? (Feel free to expand this answer to an additional page).
  
- 4) What is your highest level of education and when was it completed?
  
- 5) What community functions or activities have you participated in as a volunteer?  
 How many hours? \_\_\_\_\_
  
- 6) Some awards are based primarily upon financial need. Additional financial documentation may be requested.

**Number of people in family:** \_\_\_\_\_ **Total Annual Household Income:** \_\_\_\_\_

7) Describe your household:

Name	Relationship	Age
_____	_____	_____

Name(cont.)	Relationship(cont.)	Age(cont.)
_____	_____	_____

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8) Describe your current financial situation. Include the amount you have saved for your education, the amount that you can contribute from earnings (if you plan to work while attending school) and any additional scholarships you have obtained or for which you are applying.

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**IMPORTANT:** For your application to be considered, it must be signed and must be accompanied by the Estimated Net Cost Sheet.

**For High School Seniors: Applications must be received no later than April 15, 2025.**

Submit applications by mail to:  
Rotary Club of Key Largo  
Attention: Scholarship Committee  
PO Box 252, Key Largo, FL 33037

OR-  
Email them to: [KeyLargoRotaryScholarship@gmail.com](mailto:KeyLargoRotaryScholarship@gmail.com)

*Questions concerning the completion of this application may be directed to Cheryl Powers 502-645-3578.*



"Service Above Self"

## NET COST WORKSHEET

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
School Attending

### Estimated Costs

Year 1

Year 2

<u>Tuition</u>	\$	\$
Room and Board	\$	\$
Books & Supplies	\$	\$
Lab Fees / Misc.	\$	\$
<b>Total Cost</b>	\$	\$
<u>Sources of Cash</u>		
Florida Prepaid	\$	\$
Bright Futures	\$	\$
Scholarship 1:	\$	\$
Scholarship 2:	\$	\$
Other Scholarships	\$	\$
Dollars from Savings	\$	\$
Dollars from Parents/Relatives	\$	\$
Dollars from Working	\$	\$
Dollars from Loans	\$	\$
Other :	\$	\$
<b>Total of Sources</b>	\$	\$
<b>Estimated Shortfall (Costs minus Sources)</b>	\$	\$

Parent(s)/Guardian Signature:

Student Signature: