 **Rotary Clubs of Shelton**

**Scholarship Application**

***Must be a Mason County resident to apply***

**PERSONAL INFORMATION**

***Please print or type legibly.***

|  |  |  |  |
| --- | --- | --- | --- |
| Applicants Name |  | High School Grad Year |  |
| Mailing Address |  | City |  | State |  | Zip |  |
| Email |  | Primary Phone |  | Cell Phone |  |

**SCHOOL INFORMATION**

**High School *Please print or type legibly.***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| School Name |  | Running Start | Yes |  | No |  | GPA |  |

**Present or Future College / University / Vocational School**

|  |  |  |  |
| --- | --- | --- | --- |
| School Name |  | Student ID # |  |
| Mailing Address |  | City |  | State |  | Zip |  |

**SCHOLARSHIP INFORMATION** (I’m applying for:)

***You can receive ONLY one Rotary Clubs of Shelton scholarship per year. You may apply for a second scholarship after the next year for a total of two***

***.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Academic Education (High School Class of 2023)  |  | Continuing Education (Graduates prior to 2022 |  | Vocational/Trade School |  |
| Have you been awarded a Rotary Scholarship in the past? | Yes |  | No |  |

 **APPLICATION REQUIREMENTS**

|  |  |
| --- | --- |
|  | **Application packet:**Application is due no later than April 7, 2023. Email applications to aries\_denis@yahoo.com. |
|  | **Official Transcripts:**(*Can use the first semester transcripts)* |
|  | **Personal Statement:***Your personal statement should be no more than two single sided typed pages describing: education plans and goals, honors and awards, leadership skills, contributions to family, school, or community; employment, or anything else that you believe should be considered for a Rotary scholarship.*  |
|  | **Interview:** Oral interviews will be scheduled. They may be in three different formats: 1) Telephonic, 2) Zoom, 3) In person. A schedular will contact you to set up your interview. The interview process will be explained at that time. |
|  | **Consent to release Photograph**Please include a facial photo with your packet.*I hereby grant permission to the two Shelton Rotary Clubs and Club of Shelton Skookum to use my photograph for promotional purposes. Parent/Guardian signature required if applicant is under 18 years of age.* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Applicants Signature** |  | **Printed Name** |  | **Date** |  |
| **Parents Signature** |  | **Printed Name** |  | **Date** |  |

 ***Scholarship Interviews will be conducted the last week of April. Evaluation will be based on application packet, personal statement, community involvement, personal responsibilities, academic goals, transcripts, and your interview performance. All applicants are required to provide a photo ID (ASB Card, Driver’s License, etc.) at the time of your interview.***