

**CAMBRIDGE ROTARY CLUB**  
**P.O. BOX 1527**  
**CAMBRIDGE, MARYLAND 21613**

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**APPLICATION AND INSTRUCTIONS FOR THE WEYGAND-ROTARY  
SCHOLARSHIP GRANT**

This is a need-based Scholarship. Applicants must be graduating Dorchester County High School Seniors with the intention of attending a 4 year or 2 year College/University or Technical (trade) School.

Our selection criteria are based upon financial need and the student's sincere interest in furthering their education to the completion of a degree or certificate of proficiency. Grades, Class Standing, Grade Point Average and Test Scores will be considered as well as in school and outside of School Community activities.

**STEP BY STEP INSTRUCTIONS FOR COMPLETING THIS APPLICATION:**

- 1) Print the entire application from this website.
- 2) The Student completes his/her part of the application.
- 3) The Parent/Legal Guardian completes their portion of the application. Please provide complete and accurate information as requested in the "Statement of Parent or Guardian" as this Scholarship is need based.
- 4) The Student returns the completed application to his/her assigned Guidance Counselor for their completion of the "Report of Counselor or Principal". The Guidance office will also provide the Students Data Sheet (Grades, Grade point Average, Class Standing) and SAT/ACT test scores. It is imperative this information be provided.
- 5) The deadline for completing the application is 04/15/2021. A representative from the Cambridge Rotary Club will contact the HS Guidance office to make arrangements to pick up the applications.
- 6) The Students selected will be notified by a member of the Cambridge Rotary Student Funds, Inc. The Guidance offices will also be notified.

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**APPLICATION FOR WEYGAND-ROTARY SCHOLARSHIP GRANT**

To the Scholarships, Awards, and Student Loans Committee:

I hereby make application for a Weygand-Rotary Scholarship Grant for the school year of \_\_\_\_\_ to \_\_\_\_\_.

Name: (Please type or print): \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Home address: \_\_\_\_\_

Phone # \_\_\_\_\_ Email Address \_\_\_\_\_

High school last attended, or presently attending: \_\_\_\_\_

Date, or anticipated date of graduation: \_\_\_\_\_

Names of parents or guardian: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Name of college or other school you plan to attend: \_\_\_\_\_

Have you been accepted? \_\_\_\_\_

Have you submitted other applications for financial assistance? \_\_\_\_\_

Grant: \_\_\_\_\_ Approved? \_\_\_\_\_

Grant: \_\_\_\_\_ Approved? \_\_\_\_\_

Loan: \_\_\_\_\_ Approved? \_\_\_\_\_

Estimated educational costs for the coming year:

Tuition: \_\_\_\_\_ Fees: \_\_\_\_\_

Books and other supplies: \_\_\_\_\_

Room and Board: \_\_\_\_\_ Commuting costs: \_\_\_\_\_

(NOTE: Grants will be made to apply to tuition, fees, books and supplies. Grants will be paid by the Cambridge Rotary Club directly to the educational institution.)

Sponsor: (School official or other): \_\_\_\_\_

If the Scholarship Grant for which I am applying is made to me, I agree to inform the Cambridge Rotary Club and my high school or other sponsor if, for any reason my studies at the institution to which this grant will have been paid are discontinued, and I agree to return to the Cambridge Rotary Club any moneys refunded to me by the institution on account of such discontinuance.

**I authorize the release of my grades,  
class standing & test scores to  
The Rotary Student Funds, Inc.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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**APPLICATION FOR WEYGAND-ROTARY SCHOLARSHIP GRANT**  
**REPORT OF COUNCELLOR OR PRINCIPAL**

Name of student: \_\_\_\_\_

Address: \_\_\_\_\_

School: \_\_\_\_\_

Rating of Applicant:

Rating

	Scholarship	Character	Personality	Health
Excellent				
Good				
Fair				

What, in your opinion, is the applicant's potential for success?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In what field(s)? \_\_\_\_\_

\_\_\_\_\_

Please comment on the applicant's:

Reliability: \_\_\_\_\_

Ambition: \_\_\_\_\_

Willingness to work: \_\_\_\_\_

Financial need: \_\_\_\_\_

\_\_\_\_\_

**Please attach transcripts of grades and test scores.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

(Principal or Guidance Counselor)

Please send, no later than April 15, 2021 to:  
Chairman, Rotary Student Funds, Inc.  
Cambridge Rotary Club,  
P.O. Box 1527  
Cambridge, Maryland 21613

## STUDENT'S STATEMENT

Tell us about your activities in school, church, and community:

Academic Awards:

Citizenship Awards:

Summer, part-time or other employment:

Present aims, goals and ambitions:

Do you expect to earn any part of your expenses of education? If so, how?

Submit this application, to your high school principal or guidance counselor, together with the "Statement of Parents or Guardian" and one or more letters of recommendation from a faculty member, a minister or non-related community personage. The Rotary Club will obtain from the proper authorities records or transcripts of your work in school, as well as their recommendations. The Club will give your application every consideration. You will be notified promptly of the outcome.

Applicant's Name: \_\_\_\_\_

**STATEMENT OF PARENT OR GUARDIAN**

Since need is an important factor in making awards, the following information is essential.

Family Composition:

Names:

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

Others: Age: \_\_\_\_\_ School: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Income: \$ \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Income: \$ \_\_\_\_\_

Other Family Income: \_\_\_\_\_

Unusual Financial Obligations: \_\_\_\_\_

Comments: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_