

ROTARY CLUB OF THE NORTH FORK VALLEY FOUNDATION, INC.

P. O. BOX 1543

PAONIA, CO 81428

2018 SCHOLARSHIP APPLICATION FORM

(Available at: [paoniarotary.org](http://paoniarotary.org))

(See "Directions" page before executing)

Submit this form in (QUINTUPLICATE (5 copies), with attachments, to your High School

Advisor, by April 23, 2018.

Name: \_\_\_\_\_

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

Your Street Address: \_\_\_\_\_

Your Mailing Address: \_\_\_\_\_

Telephone/Cell #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Attach a photograph of yourself. Approx. 2 x 3 inches. Head and shoulders pose preferred:

Class Rank: \_\_\_\_\_

Overall High School GPA \_\_\_\_\_ Last Semester GPA \_\_\_\_\_

ACT Composite (highest): \_\_\_\_\_ ACT Percentile \_\_\_\_\_

Parent(s) or Guardian's Name(s): \_\_\_\_\_

Father's (Guardian's) Occupation & Employer: \_\_\_\_\_

\_\_\_\_\_

Mother's (Guardian's) Occupation & Employer: \_\_\_\_\_

\_\_\_\_\_

List siblings who are attending college, and where \_\_\_\_\_

\_\_\_\_\_

### EDUCATIONAL PLANS

To which colleges or universities have you applied? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

At which colleges or universities have you been accepted? \_\_\_\_\_

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Which college or university will you attend? \_\_\_\_\_

What will be your college major? (If you are uncertain, what subjects most interest you?)

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**FINANCIAL INFORMATION**

Can you attend college without a scholarship? \_\_\_\_\_

Will you need part-time employment in addition to this scholarship? \_\_\_\_\_

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What other scholarship(s), aid, and prizes have you applied for (list amounts)?

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How much is the annual tuition (including room and board, books and fees if known), at the college/university you plan to attend?

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On your FAFSA application, what was the amount of family contribution to your college expenses per year?

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Is this a realistic amount? \_\_\_\_\_

Have there been any changes in your family's economic conditions that would change it's ability to contribute to your college expenses?

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Are you presently employed? Yes \_\_\_\_ No \_\_\_\_ . If yes, list place of employment:

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