THE SALINA ROTARY LOCAL SCHOLARSHIP

CRITERIA TO APPLY FOR SCHOLARSHIP

1. The applicant must be a graduate of a high school located in Saline County, Kansas. High school seniors are eligible to apply for the scholarship provided they will be graduates at the time the scholarship is actually tendered.

2. Rotarians, their spouses, children, grandchildren, or spouses of their children or grandchildren are ineligible for the scholarship.

3. Financial need, leadership, scholarship, grade point average and community service are the criteria by which applicants will be judged. Applicants must have a minimum 3.0 grade point average on a 4.0 scale.

4. The applicant must be admitted to an accredited post-secondary institution within the State of Kansas as a full-time student.

5. In considering applications, preference will be given to high school seniors; however, the scholarship may be renewed on a year to year basis for a total of four years at the discretion of the Salina Rotary Club. To be considered for renewal the applicant must continue to meet eligibility requirements.

6. Scholarship amounts will be determined annually based on Rotary budget allocations.

7. The scholarship application, in order to be complete, shall consist of the following:

   A. Salina Rotary Scholarship application form (attached) completed and signed, with attachments as described in the application.

   B. Completion of the enclosed questionnaire by a teacher or non-relative.

   C. A certified transcript of grades, forwarded directly to the Salina Noon Rotary Club by the school. Transcripts should be sent to Salina Rotary Club, P. O. Box 3392, Salina, Kansas 67402-3392.

   D. A signed "Agreement of Understanding". (attached)

8. Return the complete application to Salina Rotary Club, P. O. Box 3392, Salina, Kansas 67402-3392. **Applications must be POSTMARKED by March 1 to be considered.**

SALINA NOON ROTARY CLUB SCHOLARSHIP APPLICATION

Full name: _____

Permanent mailing address: _____

_____

_____

Telephone number: _____

E-mail address: _____

Are you a U.S. citizen? _____ Date of birth: _____

Institution you will be attending: _____

Area of education you will be studying: _____

Parent(s) or Guardian(s): _____

Address: _____

_____

Please attach a list of part- and/or full-time jobs you have had, including summer jobs.

Please attach a list of all school activities and non-school community involvement you participated in during high school and college.

Please attach an essay of 300 words or less describing your vocational or professional goals.

Please provide a copy of your FAFSA, and any other information relevant to your financial need.

THE SALINA ROTARY SCHOLARSHIP

AGREEMENT OF UNDERSTANDING:

Each applicant is to read the statements listed below, sign this sheet, and submit it with the application (including attachments) and two letters of recommendation.

I understand that:

1. It will be my responsibility to contact and secure admission to the selected educational institution.

2. I understand that furtherance of my education is the primary purpose of this scholarship, and that I am expected to maintain at least a 3.0 grade point average on a 4.0 scale. I also understand that while academic studies are important, being an ambassador of goodwill for my educational institution, myself and Rotary are also important.

3. I will make every effort to honor requests from the Salina Rotary Club to make a personal appearance or presentation.

4. My scholarship may be revoked at any time for conduct that could bring discredit or adverse publicity to me, the Salina Rotary Club, or my educational institution.

_____ _____

Applicant's signature Date

Reference for Applicant for the Salina Rotary Scholarship

_____ is an applicant for the Salina Rotary Scholarship
Name of Applicant
and has requested that you serve as a reference. The Salina Rotary Scholarship program awards scholarships to recipients from area high schools.

Respondent _____ _____
Name Title

_____ _____
Phone Email

1. How long have you known the applicant? _____

2. In what capacity have you known the applicant? _____

Please respond to the following areas regarding the candidate, using a 1 (poor) – 4 (excellent) rating scale

1. Ability to work and communicate with others	**1**	**2**	**3**	**4**
2. Commitment	**1**	**2**	**3**	**4**
3. Models appropriate behavior	**1**	**2**	**3**	**4**
4. Growth Oriented	**1**	**2**	**3**	**4**
5. How well does the applicant perform under pressure?	**1**	**2**	**3**	**4**
6. Rate the applicant as a leader.	**1**	**2**	**3**	**4**
7. How likely will the applicant experience success in postsecondary studies?	**1**	**2**	**3**	**4**

A. What is this candidate's <u>strongest</u> quality? _____

B. What is this candidate's <u>weakest</u> quality? _____

C. Please provide additional comments below that would be beneficial in helping us to make a determination about this candidate. _____

_____

_____

_____

_____

_____

_____ _____
Date *Signature of Respondent*

Thank you for your participation in the Salina Rotary Scholarship program.