



Rotary Club of Key Largo

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) Where would you like to work after completing your education?

- 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?

- 6) Some awards are based primarily upon financial need. Please provide us with a verifiable household income and family size. Additional financial documentation may be requested. (Note applications will NOT be accepted without financial information.)

Number of people in family: _____

Total Annual Household Income:

Under \$25,000	<input type="checkbox"/>	\$75,000 - \$100,000	<input type="checkbox"/>
\$25,000 - \$50,000	<input type="checkbox"/>	\$100,000-\$150,000	<input type="checkbox"/>
\$50,000 - \$75,000	<input type="checkbox"/>	Over \$150,000	<input type="checkbox"/>

- 7) Describe your household:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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.

X _____
Applicant Signature

Date

X _____
Parent(s) or Guardian Signature (if applicable)

Date

COSTS/SOURCES FORM

Applicant Name _____

School Attending _____

Estimated Costs	Year 1	Year 2	Year 3	Year 4
Tuition	\$			
Room and Board	\$			
Books & Supplies	\$			
Lab Fees / Misc.	\$			
Total Cost	\$			
Sources of Payment				
Florida Prepaid	\$			
Bright Futures	\$			
Scholarship 1:	\$			
Scholarship 2:	\$			
Other Scholarships	\$			
Dollars from Savings	\$			
Dollars from Parents/Relatives	\$			
Dollars from Working	\$			
Dollars from Loans	\$			
Other :	\$			
Total of Sources	\$			
Estimated Shortfall (Costs minus Sources)	\$			

Be as specific as possible. Years 2 through 4 may be estimated as equal to year 1 if you expect no changes in circumstances. If you have not yet committed to a school, complete this form for each school you are considering.

X _____

Applicant Signature

Date

X _____

Parent(s) or Guardian Signature (if applicable)

Date