## Harvey Duke Scholarship Application Cary Central Rotary Club - 2019

\$1,500.00 per year for 4 consecutive\* years

#### CRITERIA:

PERSONAL INFORMATION

- High School Seniors enrolling in a 4 year College or University of their choice.
- Must attend a 4 year College or University during the duration of the scholarship.
- Must update Cary Central Rotary for the annual renewal of the scholarship. \* Unless special circumstances are pre approved by Cary Central Rotary Club, payments must be in successive years.
- Scholarship will be based on academic achievement, civic involvement, self initiative and financial need.
- May be required to have a personal interview with the Scholarship Committee.
- Must be submitted to High School Guidance Counselor no later than March 13, 2019

(When the blank space provided for an item is insufficient, the additional information for the item may be provided on an attached separate sheet, which has your name on it.)

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## **EDUCATIONAL INFORMATION**

From what school are you graduating?				
School	City & State	Dates Attended		
		_		
Colleges to which you	u have applied for admission	(in order of your preference):		
,				
Colleges to which you	u have been admitted:			
What is your intended	d major in college?			
	OL AND COMMUNITY ACT	IVITIES ctive in each instance. BE SPECIFIC!		
•	·	cuve in each instance. BE of Eon 10:		
Academic Honors in				
School Publications,	Clubs, Sports:			
		<del>-</del>		
Employment during S	School Sessions or in Summ	er:		

Hobbies or Interests:				
Community, Church, Civic Activities or Service Projects:				
<u>FINANCIAL NEED</u>				
What are the sources of your college funding?				
Student% Parent/Family Member%				
Other (please detail)%				
Are you planning on working during the school year? Yes/No If Yes, is it for college related expenses? Yes/No				
Are you applying for or have you been awarded financial aid or other scholarships? Yes/No If Yes, please detail.				
<del> </del>				
SPECIAL CIRCUMSTANCES / OTHER ITEMS If there are any special circumstances or other items not covered in the application that you want the Selection Committee to consider, please describe them below:				

REFERENCES Please give us the name, full address, and occupation of two (2) responsible persons who have known you well for several years, whom you will ask to write a letter to the school, recommending you for the scholarship award. Select references that are familiar with your scholarship, leadership ability, character, and/or citizenship.							
Name	Address	Occupation	How long have you known this person?				
1							
2							
APPLICANT'S STATEMENT Please give us a personal statement about yourself, your life goals, your interests, your ambitions, and your hopes. We encourage you to express your feelings freely so that we may know you as a unique individual. Please attach a separate sheet for your personal statement.							
WE CERTIFY THAT THE INFORMATION GIVEN IN THIS APPLICATION IS ACCURATE AND COMPLETE TO THE BEST OF OUR KNOWLEDGE. WE HAVE READ AND ACCEPT THE RULES GOVERNING THESE SCHOLARSHIPS AS PRINTED HEREIN.							
SIGNATURE C	OF APPLICANT		DATE	_			
SIGNATURE C PARENT/GUA			DATE	-			

#### SCHOOL RECOMMENDATION

*Instructions to the Applicant:* 

Detach this sheet and give this to the appropriate school official. The two individuals who are completing the personal recommendation form should return it to this same school official.

Instructions to the School Official:

Please complete this form, sign and enclose a school transcript. Please submit this form with the completed application and two personal recommendation forms by the deadline.

CLASS STANDING:		
THE APPLICANT,	, IS	IN A CLASS OF
STUDENTS.		
A TRANSCRIPT IS ATTACHED.		
OLONED		
SIGNED:		<del></del>
POSITION:		
DATE:		
SCHOOL NAME:		<u>-</u>
SCHOOL ADDRESS:		

### INDIVIDUAL PERSONAL RECOMMENDATION FORM

Instructions to the Applicant:

Detach this sheet and give it to the individual for which you have requested a personal recommendation.

Instructions to the individual completing the personal recommendation.

Please complete this form. You may write your statement on a separate letterhead if you prefer, but please complete the blank information at the bottom of the page and sign the form The award is based on academic performance, service, leadership, and financial need. THIS IS A CONFIDENTIAL STATEMENT AND SHOULD NOT BE SHOWN TO THE APPLICANT. Please submit to the appropriate school official

(Name)	_ by this date	·
RECOMMEND THE APPLICANT, CARY CENTRAL ROTARY SCHOLARSH	IP FOR THESE REASO	FOR THE HARVEY DUKE NS:
Signed:		
DATE:		
ADDRESS:		