



# JAMES A. STREET ROTARY SCHOLARSHIP

## APPLICATION FORM

Financial Need \_\_\_\_\_ Amount of Award \_\_\_\_\_  
College Name \_\_\_\_\_  
Financial Aid Representative Name \_\_\_\_\_  
Telephone # (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

### PERSONAL INFORMATION

Name \_\_\_\_\_  
Last First Middle (Maiden)  
Social Security # \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip  
County \_\_\_\_\_  
Intended Academic Major \_\_\_\_\_ Career Objective \_\_\_\_\_

### ACADEMIC INFORMATION

#### ENTERING FRESHMAN:

High School \_\_\_\_\_ Graduation Date \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip  
High School GPA \_\_\_\_\_ ACT \_\_\_\_\_ SAT \_\_\_\_\_ Class Rank \_\_\_\_\_  
(4.0 scale)

#### ENTERING TRANSFER (Please complete High School Information Also):

Previous College(s) \_\_\_\_\_  
Cumulative GPA: \_\_\_\_\_ Total Credit Hours Earned \_\_\_\_\_

#### CURRENTLY ENROLLED (Please complete High School Information Also):

Cumulative GPA: \_\_\_\_\_ Total Credit Hours Earned \_\_\_\_\_