

**Rotary Club of Novato Sunrise**  
**Bill Bell Memorial Scholarship Application**  
**\$1,000**

**General Stipulations for Scholarship Applicant:**

Must be a graduating senior OR have received a GED from a Novato Unified School District high school in the 2024-2025 school year.

Preference will be given to those intending to pursue a career requiring a technical certificate or similar training. i.e. not a four-year college degree.

Cannot be related to a member of the Rotary Club of Novato Sunrise.

Financial need is a consideration.

**The Following Must be Included:**

- Three letters of recommendation. (See application form for specifics.)
- High school transcript, or copy of GED
- Autobiography. On a separate sheet (no more than 2 pages) describe yourself as follows:
  1. Provide examples that demonstrate your work ethic, extracurricular school activities, work experience, and/or internships, community service, or assistance to your family.
  2. Specify the career field you want to pursue.
  3. State what is needed to qualify for an entry level job in that career.
  4. Explain how you would use this scholarship money.
  5. Describe what you plan to be doing 5 years from now.

**Applications to be received no later than May 4, 2025**

**Email to: [DrJohnnt77@gmail.com](mailto:DrJohnnt77@gmail.com)**

**Mail to: RCNS Scholarship Committee Chair; 4 Acorn Ct., Novato, CA 94949**

**Scholarship to be presented at High School Award Night and/or RCNS club meeting**

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

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Contact Information:**

**Phone:** Preferred \_\_\_\_\_ **Alternate** \_\_\_\_\_

**Email:**  
\_\_\_\_\_

**High School Attended:**  
\_\_\_\_\_

**Date GED received:** (if applicable) \_\_\_\_\_

**To which Accredited School(s), Trade, Certification, or "Pathway" programs are you applying?**  
(Attach separate sheet if more than three)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**When do you expect acceptance?**  
\_\_\_\_\_

**Approximately how much do you expect your education to cost per year?** \_\_\_\_\_

**How would you expect to pay this cost?**  
\_\_\_\_\_  
\_\_\_\_\_

**Submit three Letters of Recommendation** – One from a teacher or counselor and two from persons not related to you

**Submit High School Transcript or Copy of GED**

**Submit Autobiography** (See Attached Instructions)

**Application Deadline: May 4, 2025**

**Applicant cannot be related to a member of the Rotary Club of Novato Sunrise**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_