



**APPLICATION FOR 2025  
KIRKWOOD ROTARY CLUB SCHOLARSHIP**  
**Complete this application and return by US Mail to:**

Ms. Linda Ross  
632 North Geyer Road  
Kirkwood, Missouri 63122  
314-435-2246

**or by email to:** [loveliesbylinda@yahoo.com](mailto:loveliesbylinda@yahoo.com)

**PLEASE NOTE**

- Interviews will be held on **Tuesday, April 15, 2025** at Greenbriar Hills CC From 3:00p – 7:00p
- Scholarship decisions will be communicated by Friday, April 18th.

**US MAIL APPLICATIONS MUST BE POSTMARKED BY MARCH 14, 2025.  
EMAIL APPLICATIONS MUST BE RECEIVED BY MARCH 14, 2025.**

**NOTE: The awards luncheon will be held at noon on May 1, 2025 at the Kirkwood Performing Arts Center.**

**PERSONAL:**

Full Name \_\_\_\_\_  
(last) (first) (middle)

Permanent Home Address \_\_\_\_\_  
(street) (city) (state) (zip)

Number of years at above address: \_\_\_\_\_ Home Phone \_\_\_\_\_ Date of birth \_\_\_\_\_

E-Mail address \_\_\_\_\_

**GRADE SCHOOL/HIGH SCHOOL:**

Grade School Attended \_\_\_\_\_

High School Currently Attending \_\_\_\_\_

Grade Point Average \_\_\_\_\_ Class Rank \_\_\_\_\_

**FAMILY:**

Name of Parent(s) or Guardian \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Address of Parent(s) or Guardian \_\_\_\_\_

Father's/Guardian's Occupation and Type of Work \_\_\_\_\_

Mother's/Guardian's Occupation and Type of Work \_\_\_\_\_

Past Sibling(s) Who Received Rotary Scholarship (If applicable) \_\_\_\_\_

In addition to the applicant, there will be \_\_\_\_\_ other immediate family members in college next year.

**INCOME:**

Father's/Guardian's Total Annual Income ..... \$ \_\_\_\_\_

Mother's/Guardian's Total Annual Income ..... \$ \_\_\_\_\_

Applicant's Total Annual Income ..... \$ \_\_\_\_\_

Other Income from Stocks, Property, Insurance, Etc. .... \$ \_\_\_\_\_

**DEBTS:**

Debts, Other Liabilities and/or Unusual Circumstances Creating Need:

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**COLLEGE OR OTHER EDUCATIONAL INSTITUTION YOU PLAN TO ATTEND:**

School Selected: \_\_\_\_\_

Areas of Studies: \_\_\_\_\_

**APPLICATION FOR KIRKWOOD ROTARY CLUB SCHOLARSHIP** (cont.)

College Costs (estimated annual)	Room	\$ _____
	Board	\$ _____
	Tuition	\$ _____
	Books	\$ _____
	Other	\$ _____
	<b>TOTAL</b>	\$ _____

Other Financial Aid Promised	\$ _____
Parent's Contribution	\$ _____
Applicant's Contribution	\$ _____
<b>TOTAL</b>	\$ _____

**WORK EXPERIENCE:**

Type of Work (paid or voluntary) and Dates of Employment

\_\_\_\_\_

**SCHOOL ACTIVITIES:**

\_\_\_\_\_

**COMMUNITY ACTIVITIES:**

\_\_\_\_\_

**REASONS FOR APPLYING FOR A SCHOLARSHIP:**

\_\_\_\_\_

**REFERENCES:**

List two personal references (not related to applicant) and their addresses:

Name: _____	Name: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Phone: _____	Phone: _____

(Please feel free to attach additional pages with any information you think helpful or important.)

**SIGNATURES:**

Signed: _____	_____	Date: _____
(print student's full name)	(student's signature)	

**I have read and approved this application:**

Signed: _____	_____	Date: _____
(print parent's or guardian's full name)	(parent's or guardian's signature)	

Signed: _____	_____	Date: _____
(print parent's or guardian's full name)	(parent's or guardian's signature)	