



HALLANDALE BEACH-AVENTURA ROTARY FOUNDATION

SUPPLEMENTALSCHOLARSHIP APPLICATION

www.rotaryhba.org

A supplemental scholarship will be awarded to a student who is attending college, who is in need financially, and has made a difference in the community. The funds will be paid to the college upon certification by the institution of the student's enrollment in a full-time program.

ELIGIBILITY: Student must be a prior recipient of a Hallandale Beach-Aventura Rotary Foundation Scholarship, a legal resident of the United States, must have a certified grade point average of 3.2 or higher.

Mail the completed application along with essay and supporting documents to: Hallandale Beach-Aventura Rotary Foundation, P.O. Box 1097, Hallandale Beach, FL 33008 or email to: rotaryfoundationhba@gmail.com

Application deadline: Must be received by June 15th – scholarship award notification will be mailed to the student.

Please type or print legibly:

Student Name (first, then last): \_\_\_\_\_

Home Address (include street address & apt. #, city, zip) \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

High School attended: \_\_\_\_\_ High School Graduation date: \_\_\_\_\_

Current Grade Point Average: \_\_\_\_\_ (please include supporting document\*)

College: \_\_\_\_\_ Start Date: \_\_\_\_\_

Field of Study: \_\_\_\_\_

Approximate annual costs: \$ \_\_\_\_\_

Parents name(s): \_\_\_\_\_ Number of siblings at home \_\_\_\_\_

Family Annual Income: (supporting documents may be requested) \$ \_\_\_\_\_

Attach a list of school and community leadership activities, including year performed/participated, and include any supporting documentation.

Attach an essay (one page maximum) explaining your educational and career goals and any significant contributions you have made to the community.

\*Attach grade report as of the date of the application.

APPLICATION WILL NOT BE CONSIDERED IF INCOMPLETE

My signature below authorizes Hallandale Beach-Aventura Rotary Foundation to investigate my eligibility for this scholarship. (Also add Signature of Parent/Legal Guardian if under age 18.)

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