

**ROTARY CLUB OF POHNPEI, INC.  
P.O. BOX 1861  
KOLONIA, POHNPEI FM 96941**

**COLLEGE SCHOLARSHIP APPLICATION INFORMATION  
2018-2019 School Year**

**I. PURPOSE:**

The primary purpose of the Rotary Club of Pohnpei, Inc. College Scholarship is to encourage FSM citizens to pursue a post-high school education. Any FSM citizen who is a high school senior, or a currently enrolled college student, or high school graduate (or GED) and is accepted to attend an accredited institution of higher education during the upcoming academic year will be considered.

**II. SCHOLARSHIPS, AMOUNT & LIMITATIONS ON AWARDS:**

Scholarships up to an amount of \$2,000 each will be awarded. Funds will be distributed at the time of award.

**III. ELIGIBILITY:**

Any FSM citizen is eligible to apply, provided he/she will be, at the time of award, a high school graduate (or GED recipient) enrolled and attending, or accepted to attend, an accredited institution of higher education during the 2018-2019 school year.

A minimum cumulative grade point average of **3.0** (on a 4.0 scale), or its equivalent, must be maintained to initially apply for this scholarship.

**IV. INITIAL QUALIFICATION & BASIS OF SELECTION:**

A. Required:

1. Applicants must affirmatively show the need for financial assistance in pursuing higher education.
2. At a minimum, an applicant must have actively participated in at least one verifiable community service program within the past 12 months.
3. Applicants must submit a formal application (see College Scholarship Application form, attached), with all required documentation and letters of recommendation attached thereto. (See PART V)
4. An application containing false, misleading or incomplete information will be disqualified.

B. Recommended:

1. Applicant should be an individual who has impressed fellow students, members of the faculty, and/or members of the community as a person who is deserving of a chance to continue his/her education with the demonstrated ability, industriousness, dependability and determination to achieve his/her goals.
2. Applicant should show a true desire and ability to further his/her education, and should be an active participant in school and/or church and/or community activities that ultimately contribute to the betterment of his/her community.
3. Applicant should be an individual who plans, ultimately, to return to the FSM to live and work in her/her chosen profession.

V. **APPLICATION DETAILS & DEADLINE:**

1. To be considered, the Scholarship Committee must receive the application and all the following additional documentation no later than July 1, 2018.
2. College Scholarship Application Form must be filled in completely and accurately in the applicant's own handwriting or typewritten. The completed form consists of:
  - Part I General Information
  - Part II Family/Financial Information
  - Part III Career Objectives
  - Part IV Honors & Awards/Community Service
3. Please be aware that the Scholarship Committee will consider correct English grammatical usage and spelling in all applications.
4. Three (3) letters of recommendation, preferably from teachers, counselors, school administrators or religious leaders must be received. Additionally, it is the applicant's responsibility to insure that the prospective educational institution completes and submits the attached Educational Expenses and Financial Resources form.
5. Proof of enrollment or acceptance at the applicable institution of higher education must be submitted.
6. Transcript of previous or current educational institution must be submitted. This means a transcript showing completion of coursework Spring 2018.
7. A copy of the information page of your FSM Passport.
8. **Please submit the application and all attachments in one package, not piecemeal. The only exception is if the transcript is required to be sent separately.**

9. Please remember that all mail service to/from Pohnpei can take two weeks or more, even within the FSM. Applicants should plan accordingly. Please send the four-page application plus all other required information to:

Rotary Club of Pohnpei , Inc. – Scholarship Committee  
P.O. Box 1861  
Kolonia, Pohnpei, FM 96941  
Fax: (691) 320-5502 or [rotarypohnpei@gmail.com](mailto:rotarypohnpei@gmail.com)

Email filings are encouraged.

**VI. REVIEW AND INTERVIEW:**

The Rotary Scholarship Committee will do initial screening of applications. After a thorough review and assessment of each candidate's information, finalists will be selected. When necessary in the sole discretion of the committee, candidates may be contacted for further information and/or interviews (which may be conducted in person or via telephone) prior to final selection.

**VII. FINAL SELECTION:**

Scholarship awards will be announced no later than August 13, 2018. All selections made by the Rotary Scholarship Committee will be final.

**For further information, please contact your school counselor,  
Financial aid advisor or Rotary Club of Pohnpei, Inc. Scholarship Committee.**

The award of scholarships is discretionary to the Rotary Club of Pohnpei, Inc., and additional extenuating factors specific to each applicant may be taken into consideration.

**ROTARY CLUB OF POHNPEI, INC.**

**COLLEGE SCHOLARSHIP APPLICATION**  
**2018-2019 School Year**

**PART I. GENERAL INFORMATION**

**PERSONAL INFORMATION:**

Name \_\_\_\_\_  
(First) (Middle) (Last)

Address: \_\_\_\_\_  
(No./Street/P.O. Box) (City) (State) (Zip code)

Telephone: ( ) \_\_\_\_\_ email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place: \_\_\_\_\_ FSM S.S. # \_\_\_\_\_

Check one: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

If married, spouse's name and age: \_\_\_\_\_

Children: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list name and age of each:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART II. FAMILY/FINANCIAL INFORMATION**

1. Parents or Legal Guardians (For students under age 25):  
(a) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Employer: \_\_\_\_\_ Position: \_\_\_\_\_  
(b) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Employer: \_\_\_\_\_ Position: \_\_\_\_\_

All Applicants must complete

Please list all others living in your family household (include ages):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Please list household members employed and income(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. Does your family have any unusual or extraordinary expenses? (e.g., medical expenses) Please explain:

\_\_\_\_\_

4. Have you received or applied for any grants or other scholarships for 2018-2019?

<u>Yes or No</u>	<u>Amount</u>	<u>Applied for or Actually Received</u>
Pell: _____	_____	_____
State: _____	_____	_____
Mobil: _____	_____	_____
Continental: _____	_____	_____
Byrd: _____	_____	_____
Others: _____	_____	_____
_____	_____	_____

5. How much are your tuition costs anticipated to be:

\_\_\_\_\_

6. Please list all grants and scholarships received for the 2017-2018 school year.

	<u>Amount</u>
Pell: _____	_____
State: _____	_____
Mobil: _____	_____
Continental: _____	_____
Byrd: _____	_____
Rotary: _____	_____
Others: _____	_____
_____	_____

### **PART III. CAREER OBJECTIVES**

1. **College/Area of Study/Career Objectives:** Please list (a) the name and address of the school you plan to attend/are attending; (b) your intended major and minor fields of study; and (c) your career objectives.

(a) School: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) Major: \_\_\_\_\_ Minor: \_\_\_\_\_

(b) Career Objectives: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Do you intend to transfer schools during this school year?  
If yes, please list the following information?

(a) School: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) Major: \_\_\_\_\_ Minor: \_\_\_\_\_

(c) Accepted (yes/no) When would you start? \_\_\_\_\_

3. **When is your anticipated date of graduation? Month, Year** \_\_\_\_\_

4. **Letters of Recommendation:** Please list the name, address, phone no., position and relationship to you (if any) if each person you have asked to write letters of recommendation. It is the applicant's responsibility to ensure that these letters of recommendation are sent.

- (a)
- (b)
- (c)

5. **Permanent Contact:** Please list the name, mailing address, phone no. and relationship to you of someone who will always be able to reach you:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone No. ( ) \_\_\_\_\_  
(area code)

Fax: ( ) \_\_\_\_\_  
(area code)

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

**It is important that you have answered all of the questions above.**

6. **Essay: Please attach extra sheets.**

What do you believe are the most pressing problems that the FSM will face in the next ten years. (Max 200 words)

---

---

---

---

---

---

How will your career objectives address these problems facing the FSM. (Max 200 words)

---

---

---

**PART IV. HONORS & AWARDS/COMMUNITY SERVICE**

1. **Honors & Awards:** Please list any honors and awards you have received (including any academic honors) and the date(s) you received them. (e.g., “PICS High School Honor Roll, 2014, 2015”)

---

---

---

---

---

---

---

---

---

---

---

---

2. **Community Service/Extracurricular Activities:** Please list any community service projects in which you are/have been involved and your extracurricular activities, noting the dates of involvement:

---

---

---

---

---

---

---

---

---

---

---

---

3. **Please explain why your community service/extracurricular activities will assist you with your career goals:** (Max 200 words)

---

---

---

---

---

---

---

---

---

---

---

---

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED IN THE ABOVE FIVE (5) PAGES IS TRUE, COMPLETE AND ACCURATE.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_



**ROTARY CLUB OF POHNPEI , INC. – SCHOLARSHIP COMMITTEE  
P.O. BOX 1861  
KOLONIA, POHNPEI FM 96941**

**EDUCATIONAL EXPENSES AND FINANCIAL RESOURCES FORM\***

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

University Name: \_\_\_\_\_

Address: \_\_\_\_\_

**Section A. EDUCATIONAL EXPENSES**

- |   |          |
|---|----------|
| 1. Student Tuition: _____Resident _____Non-Resident _____NA   | \$ _____ |
| 2. Test fees, application fees, Library fees, Lab fees, Student Body fees, etc. as required by the college: | \$ _____ |
| 3. Books, School and Laboratory supplies:   | \$ _____ |
| 4. Room and Board for _____ months: (Specify) __Dormitory __ Off-Campus __w/family                          | \$ _____ |
| 5. Health Insurance:  | \$ _____ |
| 6. Miscellaneous personal expenses (e.g., clothing, pocket money, uniforms, etc.)                           | \$ _____ |
| 7. Transportation expenses – Describe:  | \$ _____ |

**TOTAL EDUCATIONAL EXPENSES** \$ \_\_\_\_\_

**Section B. FINANCIAL RESOURCES**

- |  |          |
|--|----------|
| 1. Pell Grant  | \$ _____ |
| 2. Supplemental Educational Opportunity Grant (SEOG)             | \$ _____ |
| 3. College Work-Study Program                                    | \$ _____ |
| 4. Scholarship Grant awarded by College (identify):              | \$ _____ |
| 5. Other scholarship award(s) (identify):                        | \$ _____ |
| 6. Parental support (a reasonable amount of support is expected) | \$ _____ |
| 7. Student's own resources:                                      | \$ _____ |
| 8. Spouse's support:   | \$ _____ |
| 9. Loans (identify):   | \$ _____ |
| 10. Others (identify):   | \$ _____ |

**TOTAL FINANCIAL RESOURCES** \$ \_\_\_\_\_

**Financial Need: (subtract Section B from Section A)** \$ \_\_\_\_\_

**CERTIFICATION:** To be signed by the Counselor, Advisor or Financial Aid Officer who assisted in the preparation of this form.

**I HAVE REVIEWED THIS FORM WITH THE APPLICANT AND BELIEVE THAT THE INFORMATION IS COMPLETE AND ACCURATE. THE APPLICANT IS IN GOOD STANDING AND ACCEPTED FOR ADMISSION TO THE ACCREDITED POST-SECONDARY INSTITUTIONAL FINANCIAL ASSISTANCE PROGRAMS FROM WHICH HE OR SHE IS ELIGIBLE TO RECEIVE FUNDING.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

official

**TITLE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\*(Note: This form must be received by the Rotary Scholarship Committee no later than July 15, 2018)