

Scholarship Application

Extended Deadline: April 13, 2017

Name			Telephone	
Address				_ Age
Father's Name			Occupation	
Number of people in	your family wh	o attend school:		
K-8	9-12	College	Other	r
List colleges to whic	h you have sent	applications. (Indicate	e first choice	school with an asterisk.)
		Accept	<u>ted</u>	Not Accepted
What is your intende	ed major?			
What is the estimated	d cost of your fin	rst year in college?		
Tuition	\$			
Room	\$			
Board	\$			
Books	\$			
Other	\$			
Total	\$			
Rank in class		Nation	nal Merit:	Yes
SAT scores:	Verbal	Math _		

Please include two letters of recommendation with this application.

Rotary Club of Marlborough PO Box 186 Marlborough MA 01752 www.marlboroughrotary.org