## KIWANIS CLUB OF WEST SENECA



## 2025 SCHOLARSHIP APPLICATION

The criteria of this \$500 scholarship is academics, leadership, service, and financial need. Please complete *this entire form* to the best of your ability.

Name		
Address	Zip Code	
Phone number	Cell phone number	
Parent/Guardian Names		
College or University attending		
Major field of study	Tuition	
Major field of study		
	Room & Board	
	Room & Board	
Total annual income of parents or guar-	Room & Board dians ( <i>Please circle below</i> )	
Total annual income of parents or guard Below \$20000	Room & Board dians ( <i>Please circle below</i> ) \$50000 to \$74999	
Total annual income of parents or guard Below \$20000 \$20000 to \$34999	Room & Board  dians ( <i>Please circle below</i> )  \$50000 to \$74999  \$75000 to \$100000  Over \$100000	
Total annual income of parents or guard Below \$20000 \$20000 to \$34999 \$35000 to \$49999 List names, ages and grade levels of an	Room & Board dians ( <i>Please circle below</i> )  \$50000 to \$74999  \$75000 to \$100000  Over \$100000	
Total annual income of parents or guard Below \$20000 \$20000 to \$34999 \$35000 to \$49999 List names, ages and grade levels of an	Room & Board  dians ( <i>Please circle below</i> )  \$50000 to \$74999 \$75000 to \$100000 Over \$100000  y brothers and/or sisters.  agegrade agegrade	
Total annual income of parents or guard Below \$20000 \$20000 to \$34999 \$35000 to \$49999 List names, ages and grade levels of an	Room & Board  dians ( <i>Please circle below</i> )  \$50000 to \$74999  \$75000 to \$100000  Over \$100000  y brothers and/or sisters.  agegrade agegrade agegrade	
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Overall GPA (grades 9-11)	Class Rank/_
List school extracurricular activities in	which you participate. Include any leadership roles
	urch, community, etc.) in which you participate.
List any volunteer work: List the place,	type, years and hours per year:
List any work experience:	
List any awards and/or achievements.	
Briefly discuss your educational goals.	

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Briefly describe your financial need and any special circ	umstances to be considered.
Signature of Applicant	Date

## RETURN COMPLETED APPLICATION TO KIWANIS CLUB PO BOX 451 WEST SENECA, NY 14224

Date

Signature of Parent or Guardian

DEADLINE: March 13, 2025