

*Harry W. Buzzatto Memorial
Community Service Scholarship
Rotary Club of Bridgeville - South Fayette*

Name: _____

Date of Birth: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip: _____

High School & Community Service Activities

(Please attach additional sheets if needed)

☞ Community Service Grades 9 - 12:

☞ Extracurricular Activities Grades 9 - 12:

☞ Honors/Awards Grades 9 - 12:

☞ Future Plans:

School of higher education you plan to attend: _____

Intended Major: _____ (If you have not selected a college or university at the present time, please list the schools where you have applied. If you are the winner of one of the scholarships, you will be required to give the Bridgeville Rotary Club a copy of your acceptance letter.)

Harry W. Buzzatto Memorial Community Service Scholarship Rotary Club of Bridgeville

Please respond to the following questions. Each response should be on a separate sheet of paper, in essay form, using the following criteria:

- use a separate sheet of paper for each of the two questions answered
- each essay must be typewritten or word processed, approximately one page in length, free of grammatical and punctuation errors
- double space your essay responses in 12 point type
- PLEASE MAKE SURE YOUR NAME, AS WELL AS THE HIGH SCHOOL YOU ATTEND, IS PROMINENTLY TYPED AT THE TOP OF THE ESSAY.
- Candidates must submit this sheet, along with ALL other portions of the application, to the Guidance Office of the respective school attended.

QUESTIONS:

(As per the above requirements, essay responses must be word processed in 12 point type, double spaced – one page in length.)

- ★ Please describe one of your most rewarding community service experiences. How did you feel after you performed this community service? How did you feel the service benefited the individual(s) involved?
- ★ How can performing community service in high school improve your character as a young adult? Please support your response with reasons why you think the performance of community service is an important attribute in a young person.

High School Transcript Release Form

Student's name: _____ Date of Birth: _____

Address: _____

PURPOSE OF RELEASE:

- _____ Post High School Education
- _____ Transfer of High School (includes Health Records)
- _____ Armed Forces
- _____ Employer
- X **Community Service Scholarship**

MY TRANSCRIPT IS TO BE RELEASED TO THE FOLLOWING:

- _____ Any institution of higher learning for which I provide a stamped, self-addressed envelope
- X Other:

Name: **Bridgeville - South Fayette Rotary Club**
Address: **P. O. Box 38**
Bridgeville, PA 15017

I hereby grant permission for
High School to release records as registered above.

Date

Student's Signature

Parent or Guardian(s) Signature