

# VOCATIONAL SCHOLARSHIP - PROGRAM APPLICATION

(Rev. 3/2026)

*This application is used by both our Club and for submission to District for their scholarships.*

Scholarship grants will be awarded to support students who are preparing to further themselves in a chosen vocation. Students who are entering career and technical education programs (CTE), at community colleges, technical training institutions, or vocational training programs may apply for financial scholarship awards. These awards may be applied to costs associated with tuition, books, tools, and supplies that are associated with specific CTE programs. Application package must include the following:

- One complete application form.
- A letters of reference addressing the applicant's readiness to successfully pursue the proposed CTE training program (examples: from a high school teacher, counselor, principal, employer, or someone from your community).

Transcripts from your high school or college may be requested, but not required at this time.

Please submit all requirements either by:

- Email as one pdf file to [ElginRotary@gmail.com](mailto:ElginRotary@gmail.com)
- Or Mail: Rotary Club of Elgin, PO Box 604, Elgin, IL 60121-0604
- Or Drop off at Laurie Bitter's office: 72 N. Alfred Street, Elgin, IL 60123 (call for hours 847 888 2555)
- Deadline is shown on webpage: [www.Rotary5000.org/scholarship/htm](http://www.Rotary5000.org/scholarship/htm).

## **Applicant Name: (Please write legibly)**

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Last First Middle Initial

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Address: Street City State, Zip Code

E-mail: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

## **Intended Community College Technical Training Institution, or Vocational Training Program:**

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

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

Include: Street City State, Zip Code

## **Contact Information for Financial Aid Office or Financial Services Office:**

NAME: \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Describe intended Career Technical Education degree / Vocational Certificate Program and why chosen: (If more room is needed please attach in separate document)**

**Describe all coursework, volunteer experiences, hobbies, competitions, or awards, etc. You have participated in that relate to your chosen field of study, and how they have benefited you. (If more room is needed please attach in separate document)**

**HIGH SCHOOL RECORD:**

Name of School Attended: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City State, Zip Code

Grade Point Average: \_\_\_\_\_ Weighted/ \_\_\_\_\_ Non Weighted

How would you describe your attendance records:

Exceptional    Very Good    Good    Fair    Could Have Been Better

Date of Graduation: \_\_\_\_\_

**Leadership / Participation in School Clubs, Sports, Organizations, Etc.:**

**Participation in other activities in the community and / or work place:**

**Applicant's Acknowledgement:**

I Agree with the scholarship terms and conditions. I personally completed this application.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We may contact you for an interview. Clu

## **This Application is to the Rotary Club of Elgin,**

At this time, It will not be sent to the Rotary District for consideration of their Vocational Scholarship Program as their deadline has passed. Please send to:

Rotary Club of Elgin (Noon)  
PO Box 604, Elgin, IL 60121-0604

[ElginRotary@gmail.com](mailto:ElginRotary@gmail.com) 847 888 2555 (Laurie's office number)

It is the custom of Rotary Clubs and Districts to celebrate the CTE / Vocational Scholarship award winners by announcing their accomplishments in club and District newsletters. If you (the applicant) have an objection, please note that in the document below.

If you agree, please sign the attached form in the designated area.

If you are NOT in agreement, note this in the appropriate area of the same form. Applicants are required to include this executed form with their submitted information.

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### **Photograph and Publicity Release Form**

I give Rotary International and its Rotary Clubs and District 6440, Permission to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audio tapes, digital images, and the like, taken or made on behalf of Rotary activities. I agree that Rotary and its clubs have complete ownership of such pictures, etc., including the entire copyright, and may use them for any purpose consistent with Rotary International Public Image guidelines. These uses include, but are not limited to illustrations, bulletins, exhibitions, video tapes, reprints, reproductions, publications, advertisements, and any promotional or educational materials in any medium now known or later developed, including the Internet. I acknowledge that we will not receive any compensation, etc., for the use of such pictures, etc., and hereby release Rotary International, Rotary Clubs, and Rotary Districts and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

**I have read and understand this consent and release.**

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

I give my consent to Rotary International, Rotary District 6440 and its Rotary Clubs to use my name and likeness to promote Rotary International, Rotary District 6440 and its clubs, and/or their activities.

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

Parent/legal guardian (for students under age 18): \_\_\_\_\_ Date: \_\_\_\_\_

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### **Photograph and Publicity Opt Out Form**

Complete and return this form with your Vocational Scholarship Application if you do NOT give permission for your photo, audio, or video to appear in Rotary publications and/or publicity, including the Rotary Clubs and District 6440 website or social media. Please be advised that images and videos taken in public spaces and/or at public events do not require authorization for publication.

I do NOT authorize Rotary District 6440, Rotary Clubs, or Rotary International or its officers, employees or agents, or give them permission to record my photographs or other images or likenesses in the form of audio, video, or any other medium, or to use, reproduce, modify, distribute, or publicly exhibit such recordings, in whole or in part, for any purpose. Further, I do NOT consent to the use of my name, voice, or biographical material in connection with any such recording.

I hereby confirm that I am of legal age (18) and have every right to contract in my own name as stated above. I further affirm that I have read the Opt Out information above and am familiar with its contents.

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

I do NOT give my consent to Rotary District 6440 and its Rotary Clubs to use my name and likeness to Rotary International, Rotary District 6440 and its clubs, and/or their activities.

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

Parent/Legal Guardian(for students under age 18): \_\_\_\_\_ Date: \_\_\_\_\_