

Adrian Rotary Club

4-Way Test Essay Contest Scholarship

ELIGIBILITY

1. The candidate must be a graduating senior from a Lenawee County School.
2. The candidate must be accepted for attendance at an accredited trade school, community college, or baccalaureate degree granting institution of higher education.

OTHER CONSIDERATIONS

1. This scholarship will be for one year in length.
2. The amount of the scholarship will not exceed \$1,000 per year.
3. The scholarship will be paid jointly to the student and the institution with one-half payment being made each semester, providing the student continues his/her formal education into the second semester.

GENERAL INSTRUCTIONS

1. Applications and statements must be typewritten and signed in all instances.
2. Official high school transcripts are required from the beginning of the 9th grade up to the due date of the application. Transcripts may be photocopied provided the school authorizes it.
3. College admission test scores (ACT) are required to be attached and also may be photocopied.
4. The applicant shall include an essay on the 4-Way test. The 4-Way test asks four simple questions:
 1. Is it the TRUTH?
 2. Is it FAIR to all concerned?
 3. Will it build GOODWILL and BETTER FRIENDSHIPS?
 4. Will it be BENEFICIAL to all concerned?
5. The application should be prepared and arranged in the following order:
 - a. Completed and signed application
 - b. Essay on the 4-Way test (see #4)
 - c. Transcripts.
 - d. College admission test scores (ACT)
6. Deadline for submitting the application is the second Friday in March.

Mail or deliver to: Lenawee County Education Foundation
Attention: Janet McDowell
4107 N. Adrian Highway
Adrian, MI 49221

ADRIAN ROTARY CLUB
4-WAY TEST ESSAY SCHOLARSHIP

The Adrian Rotary Club is an annual scholarship which was established in 1996. The annual scholarship is to be awarded to a graduating senior from a local or private high school from Lenawee County. The applicant must have shown superior scholastic achievement, leadership, and community involvement.

APPLICATION

DATE: _____

Student's Full Name: Ms. _____
Mr. _____

Student's Address _____ Phone _____
Street Area/Number

Date & Place of Birth _____ City _____ State _____ Zip _____
Citizenship _____

Schools attended (ninth through twelfth grades)

| Name of School | Date of Entrance | Period Attended |
|----------------|------------------|-----------------|
|----------------|------------------|-----------------|

| | | |
|----------------|------------------|-----------------|
| Name of School | Date of Entrance | Period Attended |
|----------------|------------------|-----------------|

Date will graduate _____ Number in Class _____ Rank in Class _____

ACTIVITIES AND INVOLVEMENT

SCHOOL RELATED ACTIVITIES AND INVOLVEMENT

Organization: Please state name of organization, year, and if an office was held.
For Example: Cheerleading 3,4 Co-Captain 4. State only major activities.

Honors and Awards (state year and nature of honor or award).

NON-SCHOOL RELATED ACTIVITIES AND INVOLVEMENT

Organization: Please state name of organization, year and if an office was held. For example: Church youth group, scouting, etc. State only major activities. _____

Honors and Awards (state year and nature of honor or award). _____

PLANS FOR COLLEGE ENROLLMENT

State your plans for enrollment in an accredited public or trade school, community college, or baccalaureate degree granting institution of higher education. Please indicate the field you wish to study.

EMPLOYMENT

Positions held in gainful employment, periods of employment, and average time employed each week, etc.

STATEMENT OF APPLICANT

I understand that this Scholarship, if granted to me, is for pursuing the course of study at the college or university stated in this application. If for any reason my plans change before beginning my Freshman year I will inform the Trustees by letter. At that time the Trustees will have the right to reevaluate my application and revoke my Scholarship.

I also understand that failure to notify the Trustees of any change in my college plans will result in automatic revocation of any Scholarship that I might have otherwise received from the Trust.

I understand that the LISD may publish my name and photograph if I am awarded this scholarship.

DATE: _____

Parent's Signature (If student is not 18)

Student Applicant Signature

I give permission to release my high school grades and test scores to the Scholarship selection committee.

Signature of Applicant