



**District 6400
Rotary Youth Exchange
School Year Program**

EXCHANGE & SCHOLARSHIP PRELIMINARY APPLICATION

Please use a typewriter or print clearly with black ink.

**Mail to: Mary Anne Demo
6233 Adams Ave Warren, MI 48092 USA
Phone: 586-979-6920**

ATTACH A RECENT GOOD
QUALITY
HEAD AND SHOULDERS
PHOTOGRAPH
(2 X 2 ½ INCHES OR
50 X 60 mm)

“SMILE”

IF POSSIBLE, PHOTOGRAPH
SHOULD BE IN COLOR AND
SHOW YOU SMILING

Name: _____ Sex: Male _____ Female: _____

Mailing Address: _____

City: _____ State/Prov. _____ Zip/Postal Code: _____

Phone:(____) _____ Date of Birth: Month: _____ Day _____ Year _____ Age Now: _____

Father's Name: _____ Mother's Name: _____

Attach a separate sheet for questions 1 – 7 if needed.

1. Present grade in school _____ Approximate cumulative place in class _____ out of total number in class of _____.
Scholastic average last year _____.
2. What are your school interests, activities and achievements? (Class office, student council, athletics, etc.)
3. What are your hobbies or accomplishments? (Art, music, swimming, golf, etc.)
4. What are your future ambitions and career plans?
5. You may be asked to speak to Rotary Clubs or other organizations. Have you had any experience before large groups? _____. Please list.
6. What do you specifically hope to accomplish as an exchange student?
7. What languages do you speak besides English?

(Continue on reverse side.)

PARENTAL CONSENT FOR SCHOLARSHIP APPLICATION

The Rotary D6400 Youth Exchange Scholarship is designed to cover all or part of the airfare, insurance and registration costs of the student participating in the Rotary Youth Exchange Program. Scholarships will be awarded to students who demonstrate a financial need, meet the other qualifications of a District 6400 exchange student and show outstanding citizenship in his/her community. Scholarship funds are paid directly to the airline, insurance company, etc. Any refunds are to be made directly to District 6400.

The guidelines governing the scholarships are:

1. The candidate must live within the boundaries of District 6400 (Wayne, Monroe and Lenawee Counties of Michigan or Essex County of Ontario.)
2. The candidate must be currently enrolled in a secondary or high school within District 6400 or be a graduate of such a school.
3. The candidate must meet all of the requirements of the District 6400 Youth Exchange Program for outbound students, save those requirements of parental financial support. Details are available from your local Rotary Club.
4. Scholarships are for full academic year programs.
5. The Board of Directors of the Rotary club that nominates a student must state that it has examined the family's financial situation and that it is convinced that the student is in need of the scholarship in order to participate in the exchange.
6. Students will be interviewed by the District Youth Exchange Scholarship Committee and will undergo the interview process of the District Youth Exchange program. The recommendations of the District Youth Exchange Scholarship Committee will be forwarded to the District Governor for approval. Only when the Governor has approved the scholarship(s) will it become official.
7. Since Rotary clubs and individuals sponsor this scholarship program, the number of scholarships available for a given year may vary.
8. The deadline for nominations is November 1 for students going on exchange for the next academic year. Students should forward both the Youth Exchange application and the Scholarship application to the designated Youth Exchange Chair.

CONSENT OF PARENTS/GUARDIAN FOR STUDENT NAMED ON REVERSE SIDE TO PARTICIPATE IN THE ROTARY YOUTH EXCHANGE PROGRAM AND TO APPLY FOR THE ROTARY DISTRICT 6400 YOUTH EXCHANGE SCHOLARSHIP.

1. I / We hereby give permission for said student to travel and otherwise participate in the Rotary exchange applied for, and agree to pay all his/her student costs above those amounts covered by the Rotary District 6400 Youth Exchange Scholarship.
2. I / We hereby relieve members of any host family, any Rotarian, Rotary club and/or Rotary District involved with this exchange, and/or Rotary International, of any financial responsibility in case of accident, illness or death, except that furnished by any insurance policy provided under the Exchange (cost of insurance to be borne by the scholarship).
3. I / We understand that this scholarship program is intended for students with financial need. I / We agree to meet with the Rotarians evaluating this application and that providing information to them is an essential part of this application for scholarship and that my/our failure to do so may compromise the success of this application.

SIGNATURES: (If guardianship is a single parent or another individual, please provide specifics.)

FATHER: _____ MOTHER: _____

GUARDIAN: _____

WITNESS: _____ TITLE: _____

DATE: _____

NOMINATING ROTARY CLUB ENDORSEMENT

ROTARY CLUB: _____ DATE: _____

The Board of Directors of this Rotary club hereby endorses the nomination of the above listed student. We believe the student will need the Rotary District 6400 Youth Exchange Scholarship in order to successfully complete this exchange.

This student will require the full scholarship to complete the exchange.

THIS STUDENT WILL REQUIRE A PARTIAL SCHOLARSHIP OF \$ _____ USD TO COMPLETE THE EXCHANGE.

SIGNED:

PLEASE PRINT YOUR NAME

PLEASE PRINT YOUR NAME

PRESIDENT

SECRETARY