2026 / 2027 ROBERT N. STYRES SCHOLARSHIP
OF THE ROTARY CLUB OF THE CAPITAL CITY

Nomination Form

Date: _____

NAME: _____
Last First Middle

ADDRESS: _____
Street City State Zip

TELEPHONE: Please indicate which is best way to reach you. (m)_____(h)_____

EMAIL(s): _____

HIGH SCHOOL: _____

GRADE POINT AVERAGE (unweighted): _____(Please attach transcript.)
(weighted):_____

CAREER GOAL: _____

_____

EXTRA-CURRICULAR ACTIVITIES (May attach one additional sheet as needed):

_____

_____

_____

OTHER COMMUNITY INVOLVEMENT (May attach one additional sheet as needed):

_____

_____

FAMILY INFORMATION (Confidential)

Gross Family Income: Less than $25,000 _____ Number of Family Dependents: _____
$25,000 to $50,000 _____
$50,000 to $75,000 _____
Greater than $75,000 _____

A LETTER OF RECOMMENDATION AND A LETTER FROM THE CANDIDATE DETAILING THE CANDIDATE'S DESIRE AND NEED FOR THIS SCHOLARSHIP ARE REQUIRED. THESE LETTERS SHOULD ACCOMPANY THE NOMINATION FORM AND TRANSCRIPT.