

GLENS FALLS ROTARY CLUB



**2018 COMMUNITY SERVICE SCHOLARSHIP
GUIDANCE COUNSELOR CERTIFICATION FORM**

STUDENT APPLICANT'S NAME: _____

APPLICANT'S HIGH SCHOOL: _____

GUIDANCE COUNSELOR: _____

Guidance Counselor's phone number: _____

Guidance Counselor's e-mail address: _____

The section below is to be completed only by the student's Guidance Counselor. Once signed by the Guidance Counselor, the Certification Form should be forwarded via e-mail to:

Karin Kilgore-Green (Co-Chair, Glens Falls Rotary Scholarship Committee)
kgreen@jmzarchitects.com

TO: Rotary Scholarship Committee

I hereby certify that the applicant named above has attained at least a "B" average and therefore meets this academic requirement to be considered for the 2018 Glens Falls Rotary Club Community Service Scholarship.

(Print Guidance Counselor Name)

(Guidance Counselor Signature)

(Date)

Please Note: Children and Grandchildren of Rotarians are NOT eligible to apply for this scholarship.