

## 2026-2026 - Rotary District 5080 Youth Exchange YEAS Scholarship

Student Name \_\_\_\_\_

Address \_\_\_\_\_  
 Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone Number \_\_\_\_\_ Host District \_\_\_\_\_

Return this completed form along with:

- 1) A brief letter explaining your situation
- 2) A letter of support from your sponsoring club, Church, school, or etc.

US or Canadian Dollars

Household size in 2025-2026 year: \_\_\_\_\_ # in Household \_\_\_\_\_ # in College \_\_\_\_\_ USD \_\_\_\_\_ CD \_\_\_\_\_

Parent's and Student Income Information		Calendar Year	Exchange Year
Financial documentation may be required to verify financial status. By signing the form below, you are verifying that the information you are providing is accurate.		Jan. 2025-Dec.2025	Sept. 2026 – Aug. 2027
Mother's Gross Income from Work	\$ _____	\$ _____	
Father's Gross Income from Work	\$ _____	\$ _____	
Parent's Other Non-Taxable Income - Please circle: (ex. child support received, military benefits other than educational benefits, tax-deferred pensions, , other _____)	\$ _____		
Parent's Income Exclusions – Please circle: (ex. child support PAID, AmeriCorps award, military benefits other than educational benefits, tax-deferred pensions, , other _____)	\$ _____	\$ _____	
Students gross income from work.	\$ _____	\$ _____	

### Extraordinary Expenses (please provide documentation of expenses)

Extraordinary medical/dental expenses not covered by insurance (please explain),

I have the following unusual circumstances which limit our ability to assist our student with his/her educational expenses:

**CERTIFICATION: I certify that the information provided on this form is true and figures provided are accurate to the best of my ability.**

Student Signature/Date \_\_\_\_\_

Parent Signature/Date \_\_\_\_\_

### Estimated Youth Exchange Budget

Estimated total cost of student's exchange year \$ \_\_\_\_\_

#### Student revenue Budget:

From Parent's \$ \_\_\_\_\_

From \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Sponsor Rotary Club \$ \_\_\_\_\_

Total Revenue \$ \_\_\_\_\_

Total Amount requested \$ \_\_\_\_\_