



This scholarship, according our mission statement, will be given in good faith to United States female citizens. If the courses paid for by this scholarship are dropped, any refund due will be payable to **Scholarship Opportunities for Success**, including refunds from colleges, universities, childcare agencies or other institutions or organizations to which **Scholarship Opportunities** has paid the money. **Please return completed application with all required information included by March 21 2012.**

## Personal Information

First name, Middle Initial, and Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number (     ) \_\_\_\_\_ Cell Phone Number (     ) \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

Alternate Contact \_\_\_\_\_

Phone Number (     ) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_ Are you \_\_\_Married \_\_\_Single \_\_\_Divorced \_\_\_Widowed \_\_\_Separated

## Financial Information

**List all Household Members (Adults)** \_\_\_\_\_

**(Children, give ages)** \_\_\_\_\_

Are you employed? \_\_\_Yes \_\_\_No If no, state reason not employed \_\_\_\_\_

\_\_\_\_\_ If yes, name of employer \_\_\_\_\_

Hours worked per week \_\_\_\_\_ Salary per month \_\_\_\_\_ (Please **include copies of paycheck stubs for the last 2 months.**)

Do you receive any child support? \_\_\_Yes \_\_\_No If yes, amount per month \_\_\_\_\_

Do you receive any public support? \_\_\_Yes \_\_\_No If Yes, amount per month. \_\_\_\_\_

From what agency? \_\_\_\_\_

What are your total **monthly expenses?** \_\_\_\_\_

How do you pay for these and other living expenses? \_\_\_\_\_

Does any member of your household assist with theses expenses? \_\_\_Yes \_\_\_No If yes, amount \_\_\_\_\_

## Education

What college will you/are you attending? \_\_\_\_\_ College ID# \_\_\_\_\_

How many hours have you taken? \_\_\_\_\_ How many more hours do you need to graduate? \_\_\_\_\_

Expected date of graduation? \_\_\_\_\_ Current GPA \_\_\_\_\_

What is the total amount of your current debt for education? \_\_\_\_\_

Do you receive any financial assistance for your education \_\_\_ Yes \_\_\_ No If yes; give amounts and type of assistance. \_\_\_\_\_

Have you ever dropped a class? \_\_\_ Yes \_\_\_ No Did you get a refund? \_\_\_ Yes \_\_\_ No

Why did you drop the class? \_\_\_\_\_

## Scholarship

Have you been a past recipient of our scholarship? If yes, when? \_\_\_\_\_

Total amount of scholarship you are requesting? \_\_\_\_\_ (Up to \$2500)

### Intended use of Scholarship Funds:

Purpose	Payee	Requested Amount
Tuition		\$
Books		\$
Equipment, Computer, etc		\$
Childcare		\$
Gas card, Bus pass		\$
Other		\$

## Please Include

- \_\_\_ 1. The completed application.
- \_\_\_ 2. Reference letters (2)
- \_\_\_ 3. A detailed type written description of your career goals.
- \_\_\_ 4. A type written story that that tells about current challenges or obstacles that you must overcome.
- \_\_\_ 5. A brief statement of 2 problems or difficulties you have overcome and how they were resolved.
- \_\_\_ 6. Copies of the last 2 months paycheck stubs, if employed.

Signature of applicant \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_