

ADULT WOMAN'S SCHOLARSHIP APPLICATION

APPLICANT MUST BE AGE 19 OR OLDER AND IS CURRENTLY PURSUING AN ASSOCIATE DEGREE, FIRST BATCHELOR'S DEGREE, OR ADVANCED DEGREE.

OR

BE AGE 19 OR OLDER AND PURSUING A NON-DEGREE CERTIFICATE OR LICENSE IN A VOCATIONAL OR TECHNICAL PROGRAM.

APPLICANT MUST RESIDE IN ZIP CODE AREAS 32703, 32704, OR 32712 NOW AND FOR THE PREVIOUS TWO YEARS.

DEADLINE TO APPLY: MARCH 23rd, 2024, 5:00PM

Questions? Contact: Christy Faircloth Chairman

Call or Text: 407-342-1326

E-MAIL: cfaircloth@mindspring.com

Mail completed application to:

Christy Faircloth GFWC Apopka Woman's Club 1238 Crown Isle Circle Apopka FL 32712

APOPKA WOMAN'S CLUB ADULT WOMAN'S SCHOLARSHIP APPLICATION

Name	Date			
Address	State	Zip		
How long at this address				
Home Phone:	Cell Phone:			
School:	_ Employer			
Level of Education Completed	Job Title: _			
Marital Status	Number of Chil	dren		
G.P.A if planning to attend college: Weighted Unweighted What colleges/universities/occupational institution have you applied to?				
Have you been accepted?				
Please attach three letters of re-	commendatior	n. References may <u>not</u>		

- a. One must be an academic or employment reference.
- b. One must be from a non-school related individual.
- c. One from applicant's choice.

be from a relative.

Organizations and Activities

Organization	Officer Position	Dates of Participation
Why have you chos	sen the career field of	?
What experience do	you have in this field in the	past two years?
State why you will need a scholarship.		
Funding Information School:	n: 	
Address:	Phone:	
Student ID#:		