



Washington State Business and Professional Women's Foundation

SCHOLARSHIP APPLICATION

The Washington State Business and Professional Women (WSBPWF) Foundation provides scholarships for women attending fully accredited schools of higher education.

Scholarships available for the 2019-2020 academic year:

General Information

Eligibility Criteria for all applicants:

1. Woman student and a citizen of the United States of America.
2. A resident of Washington State for one or more years, except applicant for Military scholarship.
3. Be entering or continuing a curriculum at an accredited school in the field of study that will advance her career goals.
4. Be in need of financial assistance.
5. Have demonstrated a high scholastic ability.
6. Complete and submit the application and all required materials by deadline date.

Award Process:

1. All ORIGINAL hardcopy completed applications, with attachments, shall be sent to the Washington State Business and Professional Women's Foundation (WSBPWF) Scholarship Committee at:

**Washington State BPW Foundation
ATTN: Scholarship Committee
860 Southwest 143rd Street
Seattle WA 98166**

2. All applications must be DELIVERED by the deadline in number 4 (emailed applications will not be accepted).
3. All submitted applications are treated with confidentiality and become the property of the Washington State Business and Professional Women's Foundation. With the exception of the recipient applications, which become part of the annual Foundation records, all others are destroyed after the scholarship year.
4. **DEADLINE: Applications, with required attachments, will not be accepted if they have a postmark after May 1, 2019, and are received after May 6, 2019.**

NOTE: Late or incomplete applications will not be considered



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5. The WSBPWF Scholarship Committee will review all complete applications. Selection of recipients will be made in accordance with criteria established solely by the WSBPW Foundation's appointed committee.
6. Upon selection the WSBPWF Scholarship Committee will voucher and authorize the WSBPWF Treasurer to issue the scholarship award to the named educational institution of the recipient.
7. Awarded scholarship funds will be mailed to the educational institution stated on the application.
8. Once funds are received at the named institution, recipient may expend the funds during any term (Fall, Winter, Spring, Summer) within one year of the award date.
9. The recipient may draw on the funds, as needed for tuition, books, lab fees, and supplies appropriate to the course of study.
10. Successful recipients will be notified by mail.
11. Upon request, the recipient will submit a recent black and white photo to the committee for publicity purposes.

The Washington State Business and Professional Women's Foundation Scholarship Committee reserves the right to reject any or all applications that do not meet the requirements stated herein.

**FOR USE ONLY BY THE SCHOLARSHIP COMMITTEE OF WASHINGTON STATE
BUSINESS AND PROFESSIONAL WOMEN'S FOUNDATION**

Application # _____ Date Received _____ Status: _____

Reviewed by: _____

Reviewed by: _____

Reviewed by: _____

BPWFFOUNDATION.ORG



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Applicant's Name: _____

Scholarship applying for: _____

SCHOLARSHIP APPLICATION CHECK LIST – Attach All Required Materials

DEADLINE: Application, with required attachments, will not be accepted if postmarked after May 1, 2019, and received after May 6, 2019.

NOTE: *Late or incomplete applications will not be accepted.*

1. **Complete Application:**

- Must be legible (typed or printed clearly);
- Initial each page of the application form confirming that you have read and completed the page;
- Read Terms of Application Agreement on Page 8 of 8 (last page);
- If you agree to the terms, sign and date your application;
- Submit all eight (8) pages of this application form plus required materials.

2. **Enclose:**

- School Acceptance Letter OR Continuing Education Statement** (as applicable).
- Letters of Recommendation:** Three (3) letters signed and dated within 12 months of the application date.
- Financial Information:**
 - Financial Statement (beginning on Page 7 of the application form)
AND
 - Financial Aid Application (FAFSA)
AND
 - A Signed Copy of the applicant's **2018** IRS 1040 form OR parents 1040 form if applicant is listed as a dependent. [or latest IRS 1040 available, no earlier than 2017]
- Official Grade Transcripts:** Most recent applicable to course of study
OR **GED converted to GPA**
- Statement of Career Goals** (100 words or less).

3. **Mail all required materials to:**

**Washington State BPW Foundation
ATTN: Scholarship Committee, 860 SW 143rd Street, Seattle WA 98166**

4. **Application materials become the property of WSBPWF and will not be returned to applicant.**

(Please Type or Print Clearly – Illegible Applications will be Automatically Disqualified)



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Applicant's Name _____

Permanent Mailing Address: _____

Home Telephone: _____ Work/Cell Telephone: _____

Email: _____ Student/School Identification No: _____

Program of Study: _____

- Name of School Attending:

- Address (Street, City, St & Zip):

- Are you now enrolled? Yes **OR** No Start Date:

- Are you attending: Full time **OR** Part time?

Provide name and address of local newspaper for media release:

ARE YOU AVAILABLE FOR A PERSONAL INTERVIEW IF NECESSARY? Yes No

1. **STATEMENT OF CAREER GOAL:** (*100 words or less.*)



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2. STATEMENT OF EDUCATION AND FINANCIAL NEED:

(Tell us how your education will help achieve the above goal. The scholarships committee gives careful consideration to an applicant's educational and financial need, as well as academic achievements. Explain why you should be considered for a scholarship. Your response will be considered carefully. Use the open space below or a separate sheet of paper if necessary.)

- a. Do you plan to work during the scholarship year? Full Time Part Time No
- b. Will you receive any reimbursement for education from your employer? Yes No
- c. Will you receive any financial assistance from your family? Yes No

3. LIST CURRENT AND PAST EMPLOYMENT:

<u>Position</u>	<u>Employer</u>	<u>Hrs/Wk</u>	<u>Dates of Employment</u>



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8. FINANCIAL STATEMENT: (Full disclosure is required for consideration) If your income is not available for education, attach an explanation. Indicate any unusual expenses and other pertinent information concerning your financial assets and obligations which helps to evaluate your need. Attach any financial documents (i.e., medical statements, child support documents, and financial aid award letters) that support your financial statement. **A signed copy of your most recent application for financial aid (FAFSA) AND THE APPLICABLE 2018 IRS 1040 Tax Form (or 2017 if it is the latest IRS 1040 filed) must be enclosed.** If you do not file a Tax Form, provide an explanation.

1. Anticipated Income For the Scholarship Year:

- a. Income earned from work solely by applicant: \$ _____
 - b. Untaxed income and benefits including spousal income if any: \$ _____
 - c. Cash, savings, checking, stocks, bonds, etc.: \$ _____
 - d. Child support, alimony: \$ _____
 - e. Reimbursement from employer \$ _____
 - f. Financial assistance from family \$ _____
 - g. Other income available to applicant: _____
 - (Explain)_____ \$ _____
- TOTAL OF ALL ANTICIPATED INCOME** \$ _____

2. Anticipated Living Expenses For the Scholarship Year:

- a. Rent; Food; Clothing; etc.: \$ _____
 - b. Dependent Care: \$ _____
 - c. Health Care/Insurance: \$ _____
 - d. Other Living Expenses applicable to applicant: _____
 - (Explain)_____ \$ _____
- TOTAL OF ALL ANTICIPATED EXPENSES** \$ _____

3. Anticipated Education Related Expenses For the Scholarship Year:

- a. Tuition and Fees: \$ _____
 - b. Books and Supplies: \$ _____
 - c. Transportation: _____
 - Public? Private? \$ _____
 - d. Other education expenses applicable to applicant: _____
 - (Explain):_____ \$ _____
- TOTAL OF ALL ANTICIPATED EDUCATION EXPENSES** \$ _____



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4. Anticipated Financial Aid For the Scholarship Year: (Identify Source of Each Type of Aid)

- a. Loans: \$ _____
- b. Scholarships: \$ _____
- c. Grants: \$ _____
- d. Other financial aid available to applicant during scholarship year:
(Explain): _____ \$ _____

TOTAL OF ALL ANTICIPATED FINANCIAL AID

\$ _____

5. Summary of Funds Available For Applicant's Education During Scholarship Year:

- a. Income Available after subtracting Living Expenses:
\$ _____
- b. Education Expenses after subtracting Anticipated Financial Aid:
\$ _____

TOTAL OF ALL INCOME AVAILABLE DURING SCHOLARSHIP YEAR

\$ _____

TOTAL FUNDS REQUIRED TO ACHIEVE GOAL DURING SCHOLARSHIP YEAR

\$ _____

TERMS OF APPLICATION AGREEMENT

I hereby certify that all the information included in this application is true and complete to the best of my knowledge. I understand that this application packet will not be considered for review unless all required material is enclosed and the application is initialed on each page, signed and dated. I understand that this application will be held as confidential but no application, or supplemental documentation, will be returned. I also understand that not every eligible applicant will receive a scholarship.

Applicant's Signature: _____ Date: _____

No application will be accepted after May 6, 2019 (postmarked on or before May 1, 2019)
INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED