Scholarship Application – Due by March 26, 2025

The Woman's Club of Sanford Scholarship

Scholarship Application for School Year 2024 - 2025

A	Personal Informatio	<u>n</u>	
	Name	:	
	Current Addres	s	
	Phone	:	
	E-mail Address	:	
	Date of Birth	:	
	US Citizer	1: Yes	No
M Pa	ajor: urt-time: 0 Full-time: 0)	
G	raduation Date (expec	ted):	Type of Degree:
			(please list most recent first): Please include a copy are currently attending.
	Name		

Honors, Awards, Grants, and Scholarships:				
Name of Award	Date Additional Information			
Extra-curricular or other scho	ool-related activities (include clubs, positions held):			
Special Interests and Skills:				
Community Involvement:				
•				

C. Employment

T 1 . TT' .	/ 1 1		. ~ .\
Employment History	(Inlease I	list most recent	tiret).
Limple yillent Trister y	(picase i	nst most recen	t III Stj.

DATES	EMPLOYER	ADDRESS POSITION

Do you plan to work during the school year, excluding summer?	
Yes: ○ No: ○	
If yes, how many hours a week will you work while attending school? _	

D. References

Please submit two (2) recommendation letters. One academic reference(on letterhead from faculty or counselor) and one personal reference.

E. Personal Statement

One personal statement is required. Please submit a double-spaced typed statement which details your plans for your college years and what the future will bring if awarded this scholarship. Please relate to your education and/or career, your career goals, how your upcoming academic activity will further these goals and what you will do with this education (Suggested length: 500-750 words).

F. Financial Need Statement

Please describe your financial situation and your need for this scholarship. List your means of supporting yourself, other forms of financial assistance you expect to receive, and other relevant background and current information. Inclusion of specific (or estimated, if necessary) income and expense figures is strongly recommended. Explain any special financial circumstances. Also include sources of financial support from family and/or domestic partner.

G. Please Sign the Applicant's Statement

I certify that I am a female in need of The Woman's Club of Sanford's Scholarship to continue my education. If granted, I will use the proceeds for the payment of tuition fees, Academic supplies and book expenses at the post-secondary institution specified. I understand that misrepresentation of facts called for on this application will eliminate me from further consideration, and if awarded the scholarship, will be cause for revocation of the same. I agree to inform The Woman's Club of Sanford in the event that a) funds not reported on this application become available to me, b) my education program is interrupted or terminated, c) my current address or telephone number changes. If I am awarded the Woman's Club of Sanford scholarship, I am willing to submit at the conclusion of the scholarship year a report on how the awarded funds were expended, should I be asked.

All applications and materials become the property of the Woman's Club of Sanford upon submission

Please check one (This will have no bearing upon scl I am proud to grant permission to WCS to publis publicly announcing scholarship winners I would prefer WCOS NOT publish my name ar	h my name and/or likeness when
scholarship winners Date:	
Signature of applicant:	
Signature of parent or legal guardian:	(If applicant is under 18)
Scholarship recipients will be notified by the 1st when the standard out on June 4, 2025 luncheon at 11:00 amounts	•

9 S Oak Ave, Sanford, FL 32771. Recipients must be present to receive funds.

All applications must be postmarked by March 26, 2025 in order to be considered.

Send by Mail to:

P.O. Box 270

Sanford, FL 32772-0270

OR Email Copy to: crivictoriahuggins@gmail.com