# Christine Davis Memorial Scholarships offered by: BUSINESS & PROFESSIONAL WOMEN of ENGLEWOOD & VENICE

### 2024 Scholarship Application for Adult Learners

An Adult Learner is a Woman who is currently enrolled in or re-entering College or a Technical Training Program.

Application Deadline: May 15, 2024

Directions: Please type or print all information requested. Be accurate, supply copies of information requested. NOTE: Reviewers will look for neatness in presentation, spelling, grammatical correctness, and submission of all required documentation when considering the application. If you don't meet the requirements as stated, you will be disqualified.

#### **OVERALL PRESENTATION IS IMPORTANT**

#### **STUDENT INFORMATION**

Full Name:			
Address:			
City/State/Zip:			
Phone:	Alt. Phone:		
E-mail Address:			
Age:	Date of Birth:		
Are you a United States Citizen?			
Are you a Veteran of the United	States Military? Yes No	Honorably Discharged? Yes	No
Are you a spouse of a service mo	ember or veteran? Spouse	Widow Domestic Partner	No
A requirement for receiving this introductory speech. Do you ag speech in order to be recognize	ree to attend a Membership Me		_

If this requirement is not met, the scholarship will be awarded to the next most qualified applicant.

**APPLICATION DEADLINE: DATE May 15, 2024** 

ADULT LEARNER APPLICATION 1

# PERSONAL INFORMATION

Please circle one: Married Single Divorced Widowed Domestic Partnership					
Number of your children currently living at home with you:					
Ages of Children at home:					
FINANCIAL INFORMATION					
FAFSA - A copy of the FAFSA must be submitted with application.					
SAR – Student Aid Report is required to be submitted with the application.					
What other scholarships/financial sources have you applied for? Are there any you have already been notified that you will receive? Explain if applicable:					
Annual estimated costs: Tuition: Books/Supplies:					
HOW MUCH ARE YOU PERSONALLY ABLE TO CONTRIBUTE YEARLY TOWARD THE COLLEGE EXPENSES? \$					
Estimated Yearly Living Expenses:					
• Rent:					
• Utilities:					
• Food:					
• Insurance:					
Transportation:					
Medical:  According to the control of the cont					
Any additional expenses (Please specify):					
Total:					
This section must be completed by the school's financial aid office.					
Does student's financial record indicate financial need? Yes No					
Comments:					
Financial Aid Officer's Signature:					
Printed Name of Financial Aid Officer:					

ADULT LEARNER APPLICATION 2

## **ACADEMIC INFORMATION**

To which college or technical school have you been accepted?				
*You Must include a copy of	the letter of acceptance			
Name of School	Full Address	Phone #		
Contact Person	Studen	Student ID		
Major you are seeking:				
Are you currently attending s	school?			
IF YOU ARE CURRENTLY ATTEN	DING SCHOOL, PLEASE PROVIDE MOST RECENT	ACADEMIC TRANSCRIPT.		
	PROVIDE BACKGROUND INFORMATION	<u>!</u>		
	by attaching the following:			
A) Describe why YOU should	be awarded a scholarship. (300-350 words)			
B) Submit two (2) letters of rewho are not related to you.	ecommendation from teachers, employers o	or member of the community		
	APPLICANT STATEMENT			
	Must be submitted with application			
To the best of my knowledge	e, the information contained in this applicati	on is true and accurate.		
Applicant Signature:	Date:			
TO SUBMIT COMPLETED API	PLICATION, MAIL TO:			
Scholarship Chair BPW Engle	wood/Venice			
PO Box 611				
Englewood, FL 34295				
FOR ADDITIONAL INFORMAT Estherbird2@gmail.com	TION YOU MAY CONTACT: Esther Bird 315-44	0-6814 or		

APPLICATION MUST BE POSTMARKED NO LATER THAN May 15, 2024

ADULT LEARNER APPLICATION 3