

Whatcom Women in Business Scholarship Application



ABOUT WWiB & OUR MISSION

Whatcom Women in Business was established in 1978, and is one of the oldest and most encompassing network/referral sources for business women. It is the mission of WWiB to promote a positive image of professional women in business while developing leadership skills, strength through mutual support, mentoring and opportunities for business and personal growth.

WWiB provides regular opportunities for members and guests to mentor for personal and professional growth. WWiB is comprised of business owners and upper level managers. The membership is interested in developing and maintaining proactive roles within the association and the community at large. Through teaching, learning, leadership and peer support we strive to exemplify and promote the three areas we honor— leadership, professionalism and mentoring.

INSTRUCTIONS

1. Application must be filled out completely for consideration.
2. Type or write clearly.
3. Enclose a copy of most recent quarter/semester unofficial transcripts or written documentation of acceptance to a post-secondary Education institution.
4. Attach cover letter. (See Goals and Objectives Section.)
5. Attach two recent letters of reference.
6. Send completed application with enclosures to
Whatcom Women in Business, Scholarship Committee
PO Box 1773
Bellingham, Washington 98227
7. Application must be postmarked or submitted no later than May 15th, 2011

Please Note: All personal and financial information provided in this application will be held strictly confidential and be used solely to determine scholarship eligibility.

SCHOLARSHIP APPLICATION

Name _____

Address _____

City _____ State ____ ZIP _____

Home Phone Number _____

Cell Phone Number _____

Email Address _____

Course Study _____

Degree Sought _____

Expected Date of Completion _____ When did/do you start? _____

EDUCATION

Are you currently enrolled in school? ____ Yes ____ No

If Yes, where? _____

Major/Type of training _____ GPA _____

Attach a copy of your most recent unofficial transcripts.

EDUCATIONAL INSTITUTION IN WHICH ENROLLMENT IS DESIRED

Institution _____

Address _____

Course Study _____

Degree Sought _____

Expected Date of Completion _____ When did you start? _____

Are you currently enrolled/been accepted? _____

HIGH SCHOOL EDUCATION

Name of last high school attended _____

Address _____

Highest grade completed _____ GPA _____ Graduation date _____

COLLEGE, BUSINESS, OR OTHER TRAINING COURSES ATTENDED

(Attach additional sheets if necessary)

Name and Location _____

Dates attended: From _____ to _____ Did you graduate? _____ GPA _____

Type of Degree _____

Credit Hours earned quarter/semester _____

Name and Location _____

Dates attended: From _____ to _____ Did you graduate? _____ GPA _____

Type of Degree _____

Credit Hours earned quarter/semester _____

Reason for Leaving _____

Supervisor's Name _____ Phone _____

May we contact this employer? ____ Yes ____ No

FINANCIAL

What is the source of your personal monthly income? Employed Unemployment TANF SSI/SSD Self Employment Other
(please circle all that apply)

What is your total personal monthly income? \$ _____

Marital Status: Single Married Separated Divorced *(please circle one)*

If married, what is your total household income? \$ _____

Are you currently in foster placement? Yes No *(please circle one)*

Do you live with a parent or guardian ? Yes No *(please circle one)*

If Yes, what is the total household income? \$ _____ (Note: does not apply to foster placement)

Please understand that Whatcom Women in Business reserves the right to request a copy of your income tax statement filed with the IRS.

Do you have minor dependents? Yes No *(please circle one)*

If yes, please list their ages: _____

GOALS AND OBJECTIVES

Please submit a **cover letter** with this application outlining your educational/career goals and objectives for the next two to five years. Describe in detail why you are interested and deserving of this scholarship and provide any additional information that will help us make a decision regarding your scholarship application.

REFERENCES

In addition, please attach two letters of recommendation, either personal or professional. However, at least one should be from an individual not related to you.

1. Name _____

Occupation/Employment _____ Day Phone _____

Address _____

How do you know this person? _____

2. Name _____

Occupation/Employment _____ Day Phone _____

Address _____

How do you know this person? _____

READ BEFORE SIGNING

All of the foregoing information I have supplied in this application and attachments is a full a complete statement of the facts and it is understood and agreed that if any falsification be discovered, it will constitute grounds for rescinding scholarship funds.

Signature of Applicant _____ Date _____