

## American Association of University Women Connecticut Shoreline Branch



## APPLICATION FOR 2020 SCHOLARSHIP AWARD FOR WOMEN

GENERAL INFORMATION				
Full Legal Name (Last, First, Middle):				
Home Address (Street, City, State, Zip):				
Mailing Address:				
Email Address:	Cell Phone:			
Home Phone:	Date of Birth:			
Where did you hear or read about this group?				
EDUCATIONAL HISTORY				
If needed, please use an additional sheet of paper to list all your education history. List the name of the accredited institution, location, dates attended, graduation, degrees obtained, and GPA.				
Undergraduate College or University:				
Address:				
Dates Attended:	Major:	GPA:		
Date Graduated	Degree/Certificate:			
Graduate College or University:				
Address:				
Dates Attended:	Major:	GPA:		
Date Graduated:	Degree/Certificate:			
EMPLOYMENT HISTORY				
Please use an additional sheet of paper to list other employers for the last five years including their names, address, dates of employment, and a short description of your duties.				
Most Recent Employer:				
Address:				
Phone:	Employment Dates:			
Duties:				
SERVICE				
List activities in support of professional associations and volunteer organizations. Include leadership roles. If needed, use an additional sheet of paper to list other activities including their names, your duties, position, and participation dates.				
Activity/Organization:				
Position:	Participation Dates:			
Duties:				



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FINANCIAL INFORMATION					
Please attach a copy of your most recent Student Aid Rep	ort (SAR).				
Annual Income	Self	Household	Other Education Aid		
2019 Income					
2020 Anticipated Income					
Anticipated School Expenses (per semester)	Anticipated School Expenses (per semester)				
Tuition:	Housing:	Housing:			
Transportation:	Books:				
Other (describe):					
Describe Makeup of Household:					
Describe Financial Need:					
ATTEST					
I hereby certify that to the best of my knowledg			orrect, and that the		
scholarship aid, if granted to me, will only be us	ed toward fur	thering my education.			
Signature:		Date:			
INSTRUCTIONS					
• Completed applications and related information must be postmarked by May 1, 2020.					
• Submit application and attachments to Rita Holmberg, AAUW CT Shoreline Scholarship Chair					
Via mail to		email to			
28 Bridle Path Lane or to	_	it26holm@yahoo.com wit	-		
Madison, CT, 06443	C	of "AAUW 2020 Scholarshi	p"		
Attach the following to your application:					
$\square$ A narrative of not more than 800 words about yourself and your career goals and how the					
program you have selected will help you reach your goals. Please state why you think you should be selected for this award.					
□ A copy of your most recent SAR					
☐ Two letters of recommendation including name, phone, email, and title of the individual writing					
the recommendation (neither family nor friends). Include recommendations from those who have					
known you in a work or education setting. If currently attending school, one of the two letters					
should be from a faculty member.					
☐ All college transcripts. Only official transcripts accepted.					
NOTE: All information in the application packag	•	•	CT Shoreline		
Scholarship Committee and will be destroyed one month after the award recipient is announced.					

American Association of University Women is a membership organization changing the climate for women and girls.