

2020-2021 GFWC WEST VIRGINIA SCHOLARSHIP APPLICATION FORM
Completed Application Form DUE APRIL 1, 2021

GFWC West Virginia's Mission: GFWC West Virginia is part of an international women's organization dedicated to community improvement by enhancing the lives of others through community service.

Please print or type:

Name: _____

Last ***First*** ***Middle***

Address: _____
 Street *City* *State* *Zip Code*

Telephone: _____ **Cell phone:** _____ **Email:** _____

U.S. Citizen: *Y* *N* **WV Resident:** *Y* *N* **# of years:** _____

Name of Parents or Guardian: (if applicable) _____

Parent/Guardian Marital Status: *Single* *Married* *Divorced* *Widowed*

Telephone: _____

Family Income: (Please check the category below which properly illustrates total per year.)

Under \$10,000 _____ **\$10,100 - \$25,000** _____ **\$25,100 - \$50,000** _____

\$50,100 - \$75,000 _____ **\$75,100 - \$125,000** _____ **\$125,000 & above** _____

Number of dependent children (you count as 1): _____

Two (2) current letters of recommendation (see Rule 6a):

Personal: _____
Name ***Email*** ***Telephone***

Relationship: _____

Academic: _____

<i>Name</i>	<i>Email</i>	<i>Telephone</i>
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Name of current school attending: _____

Recent transcript of grades is required and must be attached to this form: **Yes** **No**

Name of Local GFWC West Virginia Woman's Club: (if known) _____

Do you have a relative that is a member of GFWC West Virginia? **Yes** **No**

Relationship?_____

West Virginia school you have been accepted to: _____

Major: _____ **Letter of Acceptance:** **Yes** **No**

List scholarships or student aid that you expect to or will receive including the Promise Scholarship.

PROMISE: _____	Amount: _____	Per Year
1. Source: _____	Amount: _____	Per: Year or one time (circle one)
2. Source: _____	Amount: _____	Per: Year or one time (circle one)
3. Source: _____	Amount: _____	Per: Year or one time (circle one)
4. Source: _____	Amount: _____	Per: Year or one time (circle one)

Have you previously received the GFWC West Virginia Scholarship? Yes No

Please list: (if more room is needed please attach an additional sheet)

Leadership/School activities: _____

Community Service: _____

Work Experience: _____

In your own words please describe: "How does GFWC West Virginia's mission fit with your needs for this scholarship; why do you need this scholarship and special circumstances that apply to you" (if more space is needed please attach an additional sheet).

I attest that the statements and information provided in this application are true and correct, by signing below:

Applicant's Signature

All information received on this application will remain confidential.