



The Oklahoma
Business
Women's Foundation, Inc.

DEADLINE: **MARCH 1, 2012**
Applications postmarked later than March 1, 2012 –
WILL NOT BE ACCEPTED
Applications must be **PRINTED or TYPEWRITTEN**
Failure to complete any section or follow any
instructions will result in disqualification.

SCHOLARSHIP APPLICATION FORM

Have you ever been a recipient of a scholarship or loan provided through any Business Women's Organization?

Yes No

If yes, when? _____ Name of the Organization _____

What is the purpose of this educational endeavor? (Check only one)

Career Advancement Enter/Re-enter Job Market New Career Field

Personal Data

Name _____
Last First Middle

Permanent Address _____
Street or Box Number City State and Zip (9-digit)

Home Phone (____) _____ Cell Phone (____) _____ Business Phone (____) _____

E-mail Address _____

Date of Birth ____/____/____ Are you a United States Citizen? Yes No

Marital Status Married Single Divorced Separated Widowed

Are you a single parent? Yes No Ages of dependents living in your household _____

Is anyone in your household currently enrolled in college? No Full-time Part-time

Educational Record

Check all levels of education completed to-date.

High School Diploma/GED Technical/Vocational Certificate Associate's Degree
 Bachelor's Degree Master's Degree Doctorate

College(s)/Institution(s) and Date(s) Attended

1) College/Institution: _____ Date _____

Major _____ Minor _____ Grade Point Average _____

Hours completed _____ Expected date of Graduation _____

2) College/Institution: _____ Date _____

Major _____ Minor _____ Grade Point Average _____

Hours completed _____ Expected date of Graduation _____

3) College/Institution: _____ Date _____

Major _____ Minor _____ Grade Point Average _____

Hours completed _____ Expected date of Graduation _____

Employment: List your work experience in chronological order, starting with the most recent. **DO NOT SUBSTITUTE A RESUME – the application will be disqualified.**

1) Employer _____ Dates (From –To) _____

Job Title _____ Job Responsibilities _____

Salary/Wage (Yearly) _____ Full-time Part-time

2) Employer _____ Dates (From –To) _____

Job Title _____ Job Responsibilities _____

Salary/Wage (Yearly) _____ Full-time Part-time

3) Employer _____ Dates (From –To) _____

Job Title _____ Job Responsibilities _____

Salary/Wage (Yearly) _____ Full-time Part-time

Comments, further employment explanation, etc. _____

Will you be working during the school year? No Yes, full-time Yes, part-time

Volunteer/Community Involvement: Give a brief summary of your volunteer and/or community involvement.

Financial Information: List all forms of assistance you are receiving or will be receiving for the school term for which you are applying (grants, scholarships, financial aid, public assistance, etc). _____

Enclose the following documents:

A copy of your most recent Student Aid Report (SAR) (if applicable).

A copy of your (or parent's if you are claimed as a dependent) most recent IRS Form 1040, Pages 1 and 2.

Documentation of any Public Assistance you receive (if applicable).

Educational Program for Which Scholarship is Requested

Which academic year are you applying for scholarship assistance? _____

What will be your classification for the academic year or trimester you are applying?

Freshman Sophomore Junior Senior Graduate

Other (please explain) _____

Type of Institution: Vocational/Technical Community/State College

Four-Year Public College/University Four-Year Private College/University

Name of Institution: _____

Address of Institution: _____

Field/Area of Study/Major: _____

Number of hours you will be enrolled in: Fall semester _____ Spring Semester _____

Number of hours you will be enrolled in: 1st Trimester _____ 2nd Trimester _____ 3rd Trimester _____

Type of degree sought (BA, MA, Certification, Associates, etc) _____

CAREER OBJECTIVE (Essay Section)

Enclose on a separate sheet of paper, in **500 words or less, double spaced, printed or typed**, your specific goals. Elaborate on how receiving this scholarship will help you to accomplish these goals and make a difference in your professional career. This section will be considered very carefully when your application is evaluated.

Letters of Recommendation

Enclose three (3) letters of recommendation from former teachers, school officials, social workers, or other person not related to you. Letters of recommendation must be on letterhead, signed, dated and sealed by the recommender.

Transcripts and Letter of Acceptance

Include your high school/GED transcript and/or transcripts of all courses taken since high school. Photocopies are acceptable. Enclose a copy of your acceptance letter to the school you will be attending if you are not currently enrolled.

Conditions and Terms of Agreement

- Scholarship funds cannot be used for expenses incurred before the period covered by the scholarship grant.
- Should I be selected as an Oklahoma Business Women's Foundation (Foundation) Scholarship Recipient, I agree to have my name and photograph used in publicity for the program.
- I hereby acknowledge that all of the information included in this application packet is true and complete to the best of my knowledge.
- I understand that this application will not be considered for review unless all requested materials are enclosed and the application is signed.
- I understand that, due to funding limitations, not every eligible applicant will receive an award.
- I also understand that all applications will be held confidential, but no application material will be returned.

Applications are evaluated on the applicant's:

- Documented financial need;
- Precise description of career plans and goals;
- Academic record; and
- Employment and volunteer record.

A majority of applicants who apply for a scholarship meet all eligibility criteria and are deserving of financial assistance; however, due to funding limitations, the Foundation is not able to award scholarships to all eligible applicants. All applicants, whether awarded the scholarship or not, will be notified by June 30.

Signature _____ Date _____

Mail Application Packet to the Address Below:
The Oklahoma Business Women's Foundation, Inc.
Attention: Scholarship Committee
PO Box 160
Maud, OK 74854

Did you enclose the following applicable items:
 Signed and Dated Application Form
 Essay (Career Objective)
 Student Aid Report (SAR)
 IRS Form 1040
 Public Assistance Documents
 Three (3) Letters of Recommendation
 Transcripts
 Letter of Acceptance/Proof of Enrollment

Deadline: March 1, 2012

Enclose a self addressed/stamped postcard to receive acknowledgement of application receipt by the Foundation.