

# North Land Women for Education

## Scholarship Application

**SECTION A:** *Scholarship Amount Available: \$1000.00 (3 will be awarded @ \$ 1,000.00)*  
*Deadline Date: March 29, 2018*

1. Name \_\_\_\_\_  
Last First Middle Initial
2. Permanent Address \_\_\_\_\_  
Street Address County City/State/ZIP
3. Telephone number (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Daytime Evening
4. Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_
5. Are you a U.S. Citizen? \_\_\_\_\_
6. Marital status \_\_\_\_\_
7. Spouse's name and occupation \_\_\_\_\_
8. Do you have any legal dependents who get more than half of their support from you? \_\_\_\_\_
9. Are you a veteran of the U.S. Armed Forces? \_\_\_\_\_

**SECTION B:**

10. What current educational institution are you attending?

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address County City/State/ZIP

11. What educational institution do you plan to attend?

Name \_\_\_\_\_

\_\_\_\_\_  
Street Address County City/State/ZIP

12. What will be your enrollment status? Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

13. What will be your degree/certificate? \_\_\_\_\_ Course of Study \_\_\_\_\_

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14. When do you expect to complete your degree/certificate? \_\_\_\_\_

15. What will be your year in school?

Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_  
 Graduate student \_\_\_\_\_ Other \_\_\_\_\_

16. What is your Grade Point Average? \_\_\_\_\_ Please attach documentation.

**SECTION C.**

Actual dollars & source of Funds available to you (and your spouse) for educational purposes:		Actual expenses:	
<u>Per semester</u>		<u>Per semester</u>	
Wages (full- or part-time)	\$ _____	Tuition, fees	\$ _____
Parent/Spouse	\$ _____	Books	\$ _____
Scholarships	\$ _____	Living expenses	\$ _____
Loans	\$ _____	Other (specify)	\$ _____
Other sources (identify)	\$ _____	<b>Total</b>	\$ _____
<b>Total</b>	\$ _____		

I attest that all information is complete and accurate. Any intentional falsification will result in complete reimbursement of scholarship. If asked, you agree to give proof of above information.

\_\_\_\_\_  
 Applicant Signature Date

<b>Chapter use only</b>			
<b>This application has been reviewed for the chapter eligibility requirements by:</b>			
_____	_____	_____	_____
<b>Name</b>	<b>Date</b>	<b>Name</b>	<b>Date</b>
_____	_____	_____	_____
<b>Name</b>	<b>Date</b>	<b>Name</b>	<b>Date</b>

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On a separate sheet of paper, please give a brief description of why you are choosing this career path and the reason for your choice. Tell us about your goals and your personal growth; as well as your school and community contributions. Then tell us why you feel you should be the recipient of this scholarship. This section counts very much because it is presented to the entire chapter membership. Please type/or use a computer. **Please do not put your name in the essay.** Use additional pages if necessary. Attach transcripts and copies of any other pertinent information.

Send completed application to:

Lenore Nelson  
200 West Ludington St, Ste # 6  
Iron Mountain MI 49801

906-774-6088

**Must be received by  
March 29, 2018**