

AAUW Southeast Valley Scholarship Form

Since 1888, AAUW has been one of the largest funders of women's education, investing in women who go on to change the world. We are looking for

Branch will select women pursuing a certificate or degree to advance their careers, change careers, or enter/reenter the workforce. General requirements: applicant must be a female resident of the area served by the Southeast Valley (AZ) of AAUW. Criteria for awarding scholarship: scholastic goals, demonstrate financial need, commitment to college program that indicates probable completion of program. We are specifically looking for women from the Southeast Valley who are applying to Chandler-Gilbert Community College for the upcoming Academic School Year and demonstrate a need for financial aid. The amount of the award is \$1,000. Recipients of the scholarship will have their award funds paid towards their tuition at Chandler-Gilbert Community College under their Student ID that is tied to the student's identification.

To Apply:

- 1. Attach one letter of recommendation, using the attached form.
- 2. Complete the attached application.
- 3. Turn in your application to Mary Humecke (AAUW SEV Scholarship Committee)

*Turn in by Email: mhumecke0626@gmail.com *Turn in by Mail: AAUW SEV % Mary Humecke 719 W Hemlock Way Chandler, AZ 85248

<u>Applications accepted from January 1st - May 31st</u>. Scholarship committee will review the applications in June and award students receiving the scholarship in July/August for Fall Semester.

AAUW SE VALLEY BRANCH SCHOLARSHIP APPLICATION

Today's Date:
Name:
Student ID Number:
Home Address:
Mailing Address (if different)
Local Phone Number:
Cell Phone Number:
E-mail Address:
High School Attended:
Year Graduated:
Anticipated year of graduation:
Degree or Certification you are seeking:
Financial Information
Annual Tuition:
Estimated Extra Expenses:
(books/transportation/rent/childcare etc.)

TOTAL ANNUAL EXPENSES
Plans for Financing:
Scholarships/Grants: (please state the amount of and number of years you will receive each)
Household Income:
Your annual income: (include any employment, summer employment, school
employment, etc.)
Additional Sources of Income: (child support, alimony, investment income)
Number of siblings:
Ages
Number of children:
Ages,,,
Reasons for Application/Additional Information:
Please be as specific as possible (i.e. your employment, mother's and/or father's employment, number in family, others in the family in college at present, unusual circumstances such as medical expense.) Indicate any factors that concern your need for financial help. The application is completely confidential.

Please submit a 300 word paper indicating what plans you have by attending college/furthering your education. What are your plans once you graduate? How would these funds help further your career/better your life?

*** Reply below or attach your paper to the application

Letter of Recommendation

This form should be completed by a High School/College Counselor, Teacher, or Employer who has this information available and knows the applicant well enough to make comments.
Student's possible academic or vocational plans for the years following high school:
Please give us your personal evaluation of this applicant below. Why should they be considered for this financial award? Additional letters of support may also be
included.
Your Name:
Relationship with the Applicant:
Your Email:
Your Phone Number:
Please return this recommendation to the student so they can attach
it to their application.