February 15, 2016

TO WHOM IT MAY CONCERN:

It is the intent of the Murrysville Woman’s Club to award two (2) scholarships with a minimum of $3,000.00 each for the 2015-16 academic year based primarily upon the goals and financial needs of the students. These two scholarships will only be available to women who reside in Westmoreland County and they must be at least 21 years of age before they are eligible for this award.

If you need additional copies of the scholarship applications, please feel free to copy what you need. You may call me at (724) 327-8491 if you have any questions or comments regarding this application form.

This is the 34th year that the Murrysville Woman’s Club has made this award available to deserving women. Our Club is very excited about the tremendous success of the many women whom we have assisted in attaining degrees in a variety of different vocations during the past 31 years. We hope that you will again assist us in finding interested and worthy applicants for this award.

Thank you, in advance, for your help.

Sincerely yours,

Joyce K. Somers, Chair
Education and Scholarship
Murrysville Woman’s Club
MURRYSVILLE WOMAN'S CLUB
APPLICATION FOR NONTRADITIONAL SCHOLARSHIP FOR WOMEN ONLY

NOTE: Only Westmoreland County residents may apply for this scholarship and it must be received no later than MAY 15. Please mail to:

Joyce K. Somers
3629 Forbes Trail Drive
Murrysville, Pa. 15668
Ph. (724) 327-8491

NAME: ____________________________________________

ADDRESS: ____________________________________________

AGE: ________ (Must be at least 21).

HOME PHONE: ______________ OFFICE PHONE: ____________

Location where I picked up this application ________________

My present status is:Freshman___ Sophomore___ Junior___ Senior___

REFERENCES: Provide the names of three people who can give an accurate picture of your character and motivation. Possibilities include a caseworker, a present or former employer or work associate, or someone with whom you have worked on a community project.

NAME AND ADDRESS HOME/WORK PHONE

1. ____________________________________________________________

2. ____________________________________________________________

3. ____________________________________________________________

Rev. 2/16

Received: ________
Acknowledged: ________
A. CAREER GOALS (Be specific - e.g. lawyer, nurse, draftsman, teacher, computer programmer, social worker).

__________________________________________

Do you have the science and math or other appropriate background to succeed in your chosen field? If not, have you arranged for tutoring or have you enrolled in preparatory courses? EXPLAIN:

__________________________________________

B. AT WHAT SCHOOL HAVE YOU BEEN ACCEPTED?

Name: ______________________________________

Address: ____________________________________

(New students please enclose photocopy of your letter of admission).

C. SCHOOL NOW BEING ATTENDED (For applicants who have completed at least one semester, please enclose a copy of latest transcript)

__________________________________________

Please enclose a reference from one of your professors, if possible.

D. COMMUNITY INVOLVEMENT: Write a brief summation of any activities in which you are, or were involved. Examples: PTA, Welcome Wagon, library volunteer, fund raising activities for some worthy cause, room mother, or any board or commission on which you have served.

__________________________________________

__________________________________________

__________________________________________
E. EMPLOYMENT HISTORY: Have you ever worked either full or part-time? (Briefly explain your job/jobs and list the dates worked):

_________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________

F. FAMILY RESPONSIBILITIES: If you have young children, what child care arrangements have you made?

_________________________________________________________________________________________________________________________________________________

G. TRANSPORTATION: How do you plan to get to school?

_________________________________________________________________________________________________________________________________________________

H. FINANCES: (You are expected to use this grant for tuition).

1. Please list all sources of your present income? (child support, social security, pension funds, welfare, etc.).

_________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________

2. Please list your total family income. If there is more than one income, please list each person and the amount they earned. If you are unmarried and still reside at home, please designate what portion of the income is your father’s/mother’s.

Total Family Income ____________________________________________________________

_________________________________________________________________________________________________________________________________________________

I. SUPPLEMENTAL ASSISTANCE: Have you applied for, or are you now receiving any additional grants for financial assistance? Yes______ No_______
If yes, list grant sources: ______________________________________
_____________________________________________________________

Total Amount of grants: ______________________________________
(Please do not apply for this scholarship if your grants will cover all of your tuition because this scholarship is intended for tuition only.)

J. FAMILY STATUS: Please list the total number of dependents in family (adults and children, including yourself)______.

Marital Status: (Check One).
   Single
   Married
   Separated
   Divorced
   Widowed
   Single Parent
   __________________
   __________________
   __________________
   __________________
   __________________

Are you the sole support of any children under 18? __________
   If YES, how many children? __________________________________
   __________________
   __________________
   __________________

If divorced/separated, who supports the child/children? ________
   Amount of monthly support received $__________________________
   How many are supported by this person? _______________________
   __________________
   __________________
   __________________
   __________________

K. ESSAY: Beginning below and using the reverse side, if necessary, please describe yourself and the reasons for your desire to continue your education. This is your opportunity to present your long-term goals and to persuade the committee that you have the necessary motivation to achieve them.