ZONTA INTERNATIONAL THE ZONTA CLUB OF GRAND ISLAND

ANNOUNCEMENT OF THE

\$750.00

CAREER ADVANCEMENT SCHOLARSHIP

QUALIFICATIONS

Applicants for THE ZONTA CLUB OF GRAND ISLAND \$750.00 CAREER ADVANCEMENT SCHOLARSHIP must meet the following criteria:

- 1. Be a woman twenty-five (25) years of age or older.
- 2. Be a resident of Grand Island.
- 3. Demonstrate the need for financial assistance to acquire, maintain or upgrade job skills to enter or reenter the job market, or to complete education for career advancement. The candidate can be enrolled in a degree or nondegree program, seminar or workshop.
- 4. Proof of acceptance for the desired course, program or seminar must be submitted with the application.
- 5. Submit a completed application and three (3) letters of reference to the Chair of the Zonta Scholarship Committee by the deadline specified.

The candidate may reapply for a scholarship annually in the event additional financial aid is required.

Send application information to:

THE ZONTA CLUB OF GRAND ISLAND SCHOLARHIP COMMITTEE PO BOX 1104 GRAND ISLAND, NY 14072

Completed application and letters of reference must be submitted no later than **May 15**, **2016**. It is the applicant's responsibility to see that a completed application and the three (3) letters of recommendation and/or reference are received by the Scholarship Chair.

TO BE COMPLETED BY THE APPLICANT. This information will be regarded as confidential.

1. PERSONAL DATA

NAME		PHONE	
ADDRESS		GRAND ISLAND, NY 14072	
HOW LONG AT THE PRES	ENT ADDRESS?	PREVIOUS ADDRESS	
DATE OF BIRTH	CITIZENSHIP	MARITAL STATUS	
		ENDENTS	
-			
2. ACADEMIC REHIGH SCHOOL (Name and			
		Date of graduation	
COLLEGE(S) ATTENDED	(Name(s) and location(s))		
COURSES COMPLETED_			
3. EMPLOYMENT Employer name and a	Γ RECORD address, dates of employment	t, position and salary:	
1			
2.			
3			

4. SCHOLARSHIPS, GRANTS AND LOANS

HAVE YOU EVER BEEN A	WARDED ANY SCHOLARSHIPS OR GRANTS?	PLEASE	
SPECIFY AND GIVE AMO	UNTS		
	ED ANY GOVERNMENT OR PRIVATE LOANS?		
PLEASE SPECIFY AND GIVE AMOUNTS			
	SCHOOL, PROGRAM OR SEMINAR YOU PLAN TO A		
	AM/SEMINAR.WORKSHOP		
LENGTH OF COURSE/PRO	OGRAM/SEMINAR		
WHEN DO YOU PLAN TO	BEGIN THIS COURSE?		
6. CAREER GOAL			
7. ANTICIPATED C	OST OF TRAINING		
	TUITION AND FEES		
	BOOKS AND SUPPLIES		
	OTHER (child care, etc.)		
8. APPLICANT'S IN	NCOME		

9. REFERENCES

Three letters of recommendation (not from relatives or from Zonta members) supporting your application should be sent directly to the scholarship chair by the deadline date in order for your application to be considered.

10. QUALIFICATIONS

On a separate sheet of paper please state what qualification you feel you have to succeed in your chosen field. Include your long-range plans and why you feel the Zonta Club of Grand Island should award you a scholarship.

11. APPLICANT'S CERTIFICATION

I declare that the information reported in this application is truthful and complete.		
APPLICANT'S SIGNATURE	DATE	