

# Soroptimist International of Friday Harbor “Educational Opportunity Award” Application

(Note: Applications and two references must be received or postmarked by January 31, 2017)

## Part 1: Basic Information

Name (first, middle, last): \_\_\_\_\_

Address (number and street address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Highest level of education achieved: \_\_\_\_\_ From where: \_\_\_\_\_

Date highest level of education completed: \_\_\_\_\_

## Part 2: What are your educational and career goals?

1. What is the name of the school or training program you are attending or have been accepted into?
2. What are you studying? (example: Bachelor of Science nursing degree or computer science certificate)
3. When do you expect to complete your studies (month and year)?
4. Are you working while you are getting your education (yes or no)?
  - a. If yes, where and how many hours per week?
5. In 300 words or less, please tell us about your career goals, and give specific information about how your education and training support these goals. (Please use a separate sheet of paper as necessary to submit your answer.)

Part 3: Financial Information

The Educational Opportunity Award recipient will be chosen in part based on financial need. Please share information about your annual income and expenses. Please be as specific as you can.

A. Income: Please list your ANNUAL household income and savings below:

Employment: \$\_\_\_\_\_per year      Government Assistance: \$\_\_\_\_\_per year

Savings: \$\_\_\_\_\_per year      Social Security (U.S. only):\$\_\_\_\_\_per year

Child Support: \$\_\_\_\_\_per year      Loans: \$\_\_\_\_\_per year

Alimony: \$\_\_\_\_\_per year      Scholarships: \$\_\_\_\_\_per year

Please list any additional income; including income other household members receive.

Source: \_\_\_\_\_ \$\_\_\_\_\_per year

Source: \_\_\_\_\_ \$\_\_\_\_\_per year

Source: \_\_\_\_\_ \$\_\_\_\_\_per year

TOTAL ANNUAL INCOME: \$\_\_\_\_\_per year

B: Expenses: Please list your ANNUAL household expenses below:

Housing: \$\_\_\_\_\_per year      Utilities: \$\_\_\_\_\_per year

Food: \$\_\_\_\_\_per year      Medical: \$\_\_\_\_\_per year

Childcare: \$\_\_\_\_\_per year      Transportation: \$\_\_\_\_\_per year

Tuition: \$\_\_\_\_\_per year      Books: \$\_\_\_\_\_per year

Please list any additional expenses.

Expense: \_\_\_\_\_ \$\_\_\_\_\_per year

Expense: \_\_\_\_\_ \$\_\_\_\_\_per year

Expense: \_\_\_\_\_ \$\_\_\_\_\_per year

TOTAL ANNUAL EXPENSES: \$\_\_\_\_\_per year

Part 4: Tell us more about yourself.

The Educational Opportunity Award was developed to financially assist a woman in San Juan County to achieve her educational and career goals. Applicants for this award must be enrolled in, or accepted into, an undergraduate degree or vocational skills training program, including on-line study programs. Consideration for this award will be given in part based upon financial need, as well as upon the applicant's overall life situation. When determining who will receive this award, we will take into account things such as your goals and how you are working toward achieving them, your commitment to your education, your past challenges and successes, and anything else you feel is important for us to be aware of.

In this section, you have the opportunity to tell us more about yourself. In 750 words or less, please let us know how this award would benefit you, and why you feel you are a good applicant for it. Feel free to include any information about yourself that you think is pertinent for us to know.

(Please use a separate sheet of paper as necessary to submit your answer.)

Send completed application and two completed reference forms to: Soroptimist International of Friday Harbor, PO Box 2856, Friday Harbor, WA, 98250, Attention: Diana Sibert