

**APPLICATION FOR 2011**

**WOMEN IN TOUCH  
SCHOLARSHIP/GRANT  
A PUBLIC SERVICE ORGANIZATION  
Post Office Box 4192  
Montgomery, Alabama 36101**

**[CRITERIA: THIS SCHOLARSHIP/GRANT IS BASED ON FINANCIAL NEED, COMMUNITY INVOLVEMENT, AND EXTRA CURRICULAR ACTIVITIES. COLLEGE STUDENTS MUST HAVE A 2.7 GPA AND HIGH SCHOOL STUDENTS MUST HAVE A 2.5 GPA TO QUALIFY. GPA MUST BE ESTABLISHED AT THE TIME OF APPLICATION, AND A TRANSCRIPT IS REQUIRED AS PART OF THE APPLICATION].**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City

State

Zip Code

Home Phone: ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

City

State

Zip Code

Work Phone: ( ) \_\_\_\_\_

Income: \$ \_\_\_\_\_ Weekly \_\_\_\_\_ Bi-weekly \_\_\_\_\_ Monthly

Name of High School where you are currently enrolled: \_\_\_\_\_

Please list GPA: \_\_\_\_\_ Tentative graduation date: \_\_\_\_\_

Have you been accepted at a University? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, please give name and address of University:

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Are you currently enrolled in the University listed above?  Yes  No

If you are enrolled in a University, what is your classification:

Freshman  Sophomore  Junior  Senior

Are you currently enrolled as a  full-time student  part-time student

Please provide tentative graduation date: \_\_\_\_\_

Please list current GPA: \_\_\_\_\_ (Please attach copy of transcript)

Major area of study \_\_\_\_\_

Please indicate number of hours enrolled: \_\_\_\_\_

Are you currently receiving, or have been approved for a  Scholarship,  
or  Grant?  Yes  No

If so, please indicate the amount, and for what period: \$ \_\_\_\_\_ Per  
Quarter \_\_\_\_\_ or \$ \_\_\_\_\_ Per Semester \_\_\_\_\_.

Whom will you depend on for financial support? \_\_\_\_\_

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If other than parent, what is your relationship with the person you will depend on for  
financial support? \_\_\_\_\_

**Please list the name, address, and income of the person(s) whom you will depend on for financial support.**

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**\$ \_\_\_\_\_ Weekly \_\_\_\_\_ Bi-weekly \_\_\_\_\_ Monthly**

**Are there other family members enrolled in a University at this time? If so, please list the number of family members enrolled, the name of the University, their classification, their tentative date of graduation, and to whom they depend on for financial support. (Please provide information on the back of this application or attach a separate sheet of paper).**

**Do you plan to live on or off campus for this school year? \_\_\_\_\_ On \_\_\_\_\_ Off**

**On a separate sheet of paper, please answer the following essay questions:**

- 1. Describe the types of student organizations, community service activities, clubs and organizations with which you have been involved. Include any leadership positions.**
- 2. Describe your career goals and any special talent(s) you have.**

3. Do you plan to fulfill these goals in Alabama? \_\_\_\_\_ Yes \_\_\_\_\_ No

4. Please explain why you are seeking scholarship/grant assistance and why you feel you are the best candidate for this assistance.

5. Please list names, addresses, telephone numbers, and the relationship of three references.

I hereby authorize the High School/University listed on this application to furnish verification of my GPA.

I certify that all of the information provided by me on this form is true and complete to the best of my knowledge and belief. I understand that false statements on this application will disqualify me from receiving this scholarship/grant.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**(Please include verification of income for the person(s) whom you depend on for financial support, i.e., pay stubs, earnings statement, W2 form, etc.)**

**(THIS APPLICATION MUST BE POSTMARKED BY April 30, 2011)**