

Lakeshore Business and Professional Women's Scholarship

CONTINUING EDUCATION APPLICATION FORM

Please postmark by deadline.

Mail to: Karen Schweitzer-Olson 4725 River Heights Drive Manitowoc, WI 54220

Profile

Name: Last _____ First _____ MI _____	
Address: _____	
Work Phone: (____) _____	Home Phone: (____) _____
Date of Birth: _____	Email: _____
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widow(er)	
Are you a single parent? <input type="checkbox"/> Yes <input type="checkbox"/> No How many dependants are living in your household? _____	
Will you be living in campus housing? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Required Certification and Release of Information (must be signed by applicant)

<ul style="list-style-type: none">• I hereby certify that the information provided in this application packet is accurate and complete to the best of my knowledge• I understand that all applications will be held confidential, and that no application material will be returned.• I understand that scholarship funds cannot be used for expenses incurred before the period covered by the scholarship grant.• I understand that Lakeshore Business and Professional Women's group will notify only scholarship recipients.
If selected to receive this scholarship from Lakeshore Business and Professional Women, I give them permission to release my name, institution, etc. for promotional purposes.
Signature: _____ Date: _____

Applicant's Number _____ (to be filled in by Scholarship Chair)

- **Application must be typed.**
- **Respond only in allotted space, except where otherwise indicated.**
- **Incomplete applications or applications postmarked after the deadline will not be considered.**

Educational Program for Which Scholarship is Requested

Are you currently enrolled in school? Yes Institution's Name: _____ No

If not enrolled, are you currently accepted in school for the fall semester? Yes No Pending

School you will be attending in the fall: _____

I will be attending school: Full-Time Part-Time (list number of credit hours): _____

Field of Study/Major: _____ Type of Degree (AA, BA, MA, etc.): _____

Number of College Credits Earned to Date: _____ Cumulative Grade Point Average: _____

Anticipated Graduation Date: _____

What is the purpose of your education? Mark only one.

- Career Advancement (seeking progression within your current field of work)
- Enter or Re-Enter Job Market (have been absent from, or never in the job market)
- New Career Field (returning to school to change your career)

Record of Education

Check all levels of education completed to date.

High School Diploma High School GED Technical/Vocational Certificate

Associate's Degree Bachelor's Degree Master's Degree Doctorate

List **all** schools attended. Record in chronological order, starting with the most recent. You may add pages in same format as chart:

Institution	Location (City, State)	Dates (mm/yy)		Major Field of Study	Degree/Certification Earned & Year Awarded
		From	To		

Applicant's Number _____ (to be filled in by Scholarship Chair)

Career Counseling

What counseling have you received for opportunities in the field you have selected?

Paid Employment, Homemaking, Volunteer/Community Experience

Will you work during the school year? Yes, Full-Time Yes, Part-Time No

Does your employer reimburse any portion of tuition? Yes No If so, what portion? _____

List your paid and unpaid work, homemaking, and volunteer/community experience. Record in chronological order, starting with the most recent. You may add pages in same format as chart. *Do NOT substitute your resume for this section.*

Dates (mm/yy) From To	Employer	Job Title(s) & Responsibilities	Work Status
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid
			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unpaid

Tell Us About Yourself

List any hobbies, interests, or extra-curricular activities you have participated in.

List any community activities or church organizations you have been involved in. Specify offices held or special recognition from these activities.

What do you feel has been your best personal accomplishment that enhanced your self-pride? What kind of inner growth did it give you?

Write a paragraph about your career goals. Include prerequisite classes that will outline your education process.

What subspecialties would you like to pursue?

State any unusual family financial circumstance(s) in recent years.

Additional information you think will be useful to the scholarship committee.

Don't forget to sign and date the first sheet.