



APPLICATION FOR CAREER ADVANCEMENT SCHOLARSHIP, 2012

Scholarships are awarded based on financial need and academic achievement. The information provided will be kept confidential. Candidates must live within a 50-mile radius of Summit, NJ to qualify. Applications are due by April 2, 2012.

BACKGROUND:

Have you previously applied for a Summit BPW Scholarship? _____ If so, when? _____
If you have previously been awarded a Summit BPW Scholarship, please indicate:
Date award granted _____ Amount of Award: _____
How did you hear about our scholarship program? _____

PERSONAL INFORMATION:

NAME: _____
ADDRESS: _____
CITY: _____, NJ ZIPCODE: _____
TELEPHONE: Day: _____ Evening: _____
MARITAL STATUS: _____ NO. OF DEPENDENTS _____ AGES _____
(Persons for whom you provide at least 50% of financial support)

CURRENT EMPLOYMENT STATUS:

(Please provide name and address of employer and state position held)

FULL TIME: _____
PART TIME: _____
HOBBIES/SPECIAL INTERESTS/COMMUNITY ACTIVITIES _____

EDUCATIONAL PLANS/STATUS PERTAINING TO SCHOLARSHIP:

COLLEGE/SCHOOL: _____
FIELD OF CONCENTRATION: _____
FULL TIME OR PART TIME _____ EXPECTED COMPLETION DATE: _____
RELEVANT TEST SCORES (SAST/GRE/LSAT) _____
(Please send copy of official scores)
CURRENT GRADE POINT AVERAGE: _____ CLASS STANDING: _____
(For individuals currently enrolled, please include copy of current transcript)
ANTICIPATED CREDIT HOURS: _____
(Please indicate hours for each semester in the upcoming year)
TUITION PER CREDIT HOUR: _____
ANTICIPATED TUITION EXPENSE FOR THE YEAR _____
OTHER EDUCATIONAL EXPENSES: _____
(Books, Fees, Etc.)
TOTAL ESTIMATED EDUCATIONAL EXPENSE: _____

BUSINESS AND PROFESSIONAL WOMEN'S CLUB OF SUMMIT, N.J.

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RESOURCES:

Please provide information below based on the last full calendar year. If you can be claimed as a dependent on someone else's tax return, please provide income information for that taxpayer.

YOUR INCOME (Wages, Tips, Bonus, etc.): _____

SPOUSE'S INCOME: _____

OTHER INCOME (Alimony, Child Support, Etc.) _____

INCOME FROM INVESTMENTS: _____

OTHER SCHOLARSHIPS: _____

LOANS/GRANTS: _____

TOTAL RESOURCES _____

COMMENTS REGARDING ABOVE: _____

EXPENSES:

Please provide information below based on the last full calendar year:

MORTGAGE/RENT: _____

FOOD: _____

CLOTHING: _____

MEDICAL (INSURANCE AND OTHER): _____

AUTO/TRANSPORTATION (INCLUDING GAS AND REPAIRS): _____

INSURANCE (AUTO/HOME/OTHER): _____

UTILITIES: _____

EDUCATION: _____

LOANS: _____

TAXES: _____

SPECIAL FINANCIAL EXPENSES (PLEASE EXPLAIN) _____

TOTAL EXPENSES: _____

COMMENTS REGARDING ABOVE: _____

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Attach additional pages, if necessary, for this section.

BRIEFLY DESCRIBE YOUR CAREER OBJECTIVES:

WHY ARE YOU REQUESTING A SCHOLARSHIP?

PLEASE INCLUDE A SEALED LETTER OF REFERENCE FROM SOMEONE WHO CAN ATTEST TO YOUR QUALIFICATIONS FOR THIS SCHOLARSHIP.

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PLEASE INDICATE ANY SPECIAL CIRCUMSTANCES THAT ARE RELEVANT TO THE EVALUATION OF YOUR APPLICATION.

I certify that all of the above information is accurate. I will be available for an interview on Saturday, May 14, 2011 with the BPW Scholarship Committee, if required.

Applicant's Signature _____ **Date** _____

Return completed application by April 2, 2012 to:

**Summit BPW
Scholarship Team
P.O. Box 831
Summit, New Jersey 07901**

Please include a self-addressed, stamped envelope so that we may inform you of our decision regarding your application. Decisions will be communicated no later than May 31, 2012. Please address any questions via email to: scholarship@summitbpw.org.