



SCHOLARSHIP APPLICATION

Return by **MARCH 2, 2026** to: awcscholarship@alamowomensclub.org

FULL NAME: _____ DATE OF BIRTH: _____

EMAIL: _____ PHONE: _____

ADDRESS:

Street: _____

City: _____ State: _____ Zip Code: _____

SCHOOL CURRENTLY ATTENDING: _____

1. EDUCATIONAL / VOCATIONAL PLANS, INCLUDING SCHOOL AND MAJOR, IF KNOWN:

DESCRIBE YOUR STRENGTHS:

2. LIST SPECIAL YOUR ACCOMPLISHMENTS:

3. DESCRIBE YOUR COMMUNITY INVOLVEMENT:

4. HOW WILL THE AWC SCHOLARSHIP AWARD FURTHER YOUR EDUCATIONAL GOALS?

5. HOW WILL YOU SPECIFICALLY USE THE FUNDS? _____

6. LIST OTHER SCHOLARSHIPS FOR WHICH YOU HAVE APPLIED FOR NEXT YEAR:

1.	2.	3.
4.	5.	6.

7. LIST OTHER SCHOLARSHIPS WHICH YOU HAVE ALREADY RECEIVED FOR NEXT YEAR:

	SCHOLARSHIP	\$ AMOUNT		SCHOLARSHIP	\$ AMOUNT
1.			2.		
3.			4.		
5.			6.		



8. MONTHLY FINANCIAL INCOME:

SOURCE	\$ AMOUNT
PARENTAL	
EMPLOYMENT (PLEASE DESCRIBE)	
STATE	
SCHOLARSHIP (PLEASE DESCRIBE)	
OTHER (PLEASE DESCRIBE)	
TOTAL	

9. MONTHLY FINANCIAL EXPENSE:

SOURCE	\$ AMOUNT
RENT	
TRANSPORTATION	
CHILD CARE	
OTHER (PLEASE DESCRIBE)	
TOTAL	

10. CHILDREN OR DEPENDENTS:

NUMBER:	AGE(S):

11. NAMES OF THOSE WHO WROTE YOUR RECOMMENDATIONS:

	Name	Position and Organization
1.		
2.		

12. Type / Print Your Name: _____

Signature: _____ **Date:** _____

**13. Please check that you have included the following with your application.
Failure to receive any of this information may result in disqualification.**

		✓
1.	Personal essay as outlined in the attached <i>Mission Statement and Criteria</i> .	
2.	Your name and phone number are in the upper left-hand corner of every page of your essay.	
3.	Current transcript	
4.	Two (2) letters of recommendation as noted in the instructions for AWC Scholarship Letters of Recommendation	
5.	Media and Photo Release form signed and dated	
6.	Application signed, dated and submitted by March 2, 2026 to: awcscholarship@alamowomensclub.org	