

CWN SCHOLARSHIP APPLICATION INSTRUCTIONS

Follow directions carefully and complete all sections of the application. Applications not in compliance with details specified in this document or the application form may be disqualified.

SCHOLARSHIP CRITERIA

- Be a female.
- Be at least 22 years of age by May 1, 2017.
- Be a resident of Talbot or one of the immediate surrounding counties and a US citizen or US national.
- Be a High School graduate or have earned a GED.
- Demonstrate financial need.
- Be officially accepted into an accredited program or certificate program at a US college or university.
- Must carry minimum 3 credits per semester.
- Demonstrate clear career plans.
- **Not** be earning a doctoral-level degree.
- Past scholarship winners can reapply annually for a scholarship given a G.P.A. of 3.0 on a 4.0 scale and must provide a college transcript to that effect.
- Priority will be given to women who are returning/entering college and returning to the workforce.

APPLICATION PROCESS INFORMATION

- The application form and all accompanying documents must be completed in English. **Application must be completed in its entirety.** Any applications not completed in compliance with the details of the application form may be disqualified. All application forms must be submitted in a single envelope. Faxed or emailed applications will **not** be accepted.
- The application package is attached at the end of this document.
- Applications must be received by the Scholarship Chair **postmarked no later than April 30, 2017.**
- The Committee will meet within 3 weeks after receipt of the last applications to reach a consensus on scholarship awards and awardees.
- All awardees will be sent letters of congratulations no later than **May 30, 2017.**
- The Director of Financial Aid at the institution of each scholarship recipient will be notified by telephone to advise them of the identity of the scholarship recipient.
- All checks will be made payable to the institution of choice and mailed directly to the institution's Director of Financial Aid.

- **Awardees must attend the award presentation at the June CWN meeting (May 2017).**
Details to be announced.

The amount and number of scholarships to be awarded will be at the discretion of the Committee.

The Committee reserves the right to retain funds if it is determined that there are no appropriately qualified applicants.

REQUIRED APPLICATION COMPONENTS

1. **APPLICATION FORM** must be fully completed, signed, and dated. Read the certification and release of information section thoroughly and make sure that you understand it. Sign and date the application to indicate your agreement. **Without your signature and the date, your application will be disqualified.**
2. **PROOF OF ELIGIBILITY.** Attach a copy of your High School diploma or your GED certification demonstrating that you have successfully completed high school graduation requirements.
3. **LETTER OF ACCEPTANCE/PROOF OF ENROLLMENT.** Provide a copy of the acceptance letter to the school and program of study you will pursue during the 2017-2018 academic year (the year for which you are requesting funding). Alternatively, you may provide other documentation from the Registrar's Office that shows proof of enrollment.
4. **PROOF OF U.S. CITIZINSHIP.** Provide a **copy (do not send original)** of your birth certificate, US passport, voter registration card, or certificate of citizenship or naturalization. The following are not acceptable: Driver's license, Social Security card, military service record, etc.
5. **TWO LETTERS OF RECOMMENDATION.** Provide the letter of recommendation form to each of the two people you have chosen to write a letter. The letters should be from different sources (for instance, employer, professor, and clergy). Letters cannot be from relatives. Allow your recommenders at least two weeks to complete their recommendations.

The letters should be written on letterhead. Recommendation letters must be current and dated no earlier than six months before date of submission of application; older letters or copies will not be considered valid.

The letter must be confidential. Ask your recommender to return the recommendation form and letter to you in a sealed envelope with his or her signature written across the seal. You must submit both sealed recommendations with your application; there are no exceptions. Two letters are required; any additional letters will be discarded.

Letters should highlight:

- Academic, employment, and/or volunteer record
- Ability to undertake and complete proposed training
- Outstanding strengths or characteristics
- Any other information that would assist the Scholarship Committee in the selection process.

2017-2018 Chesapeake Women's Network Scholarship

APPLICATION FORM

Submission Deadline: **April 30, 2017**

- Carefully review the *Required Application Components* before completing application.
- Type or write legibly in black or blue ink.
- Confine responses to allotted space, except where otherwise instructed.
- Review, sign, and date certification.
- Incomplete applications or applications postmarked after April 30, 2017 will not be considered.

Profile

Name: Last _____ First _____ MI _____

Permanent address _____

City _____ State _____ Zip _____

Home phone _(____)_____

Work phone _(____)_____ Fax _(____)_____

Email _____

Social Security Number ____ -- ____ -- ____

Date of birth ____/____/____

Age _____

Income Information and Personal Resources

Are you currently employed? _____ Hours per week: _____ Earnings per week \$ _____

Are you currently receiving financial aid? _____

If yes, list the aid that you are receiving, the amount, and the award period.

Are you a US citizen or US national? [] Yes [] No

(If no, you are not eligible. Permanent residents are not eligible.)

[Type here]
CWN Form 3-2017 APP

Acceptable documentation of US citizenship: Copy of birth certificate, US passport, voter registration card, or certificate of citizenship or naturalization. Not acceptable: Driver's license, Social Security card, military service record, etc.

Have you ever been a recipient of a scholarship through the Chesapeake Women's Network?

Yes No

Please complete the following:

Marital status: Married Single Divorced Separated Widowed

Are you a single parent? Yes No

How many dependents are living in your household?

List age of each dependent.

How many additional dependents do you have that are not living in your household? - List ages
Total number of dependents must match number claimed on your tax return. Do not include yourself or spouse.

Will you be living in campus housing? Yes No

Educational Program for Which Scholarship Is Requested

Are you currently enrolled in school? Yes No

If not enrolled, are you currently accepted into school for the fall semester or a start date no later than January 2018?

Yes (Enclose acceptance letter.)

Pending (Acceptance letter must be sent to CWN Scholarship Chair for receipt before May 15, 2017)

No (Acceptance letter must be sent to CWN Scholarship Chair for receipt before May 15, 2017.)

I will be attending school:

Full-time Part-time; list number of credit hours

Type of degree or certificate program (Check one only.)

Associate's degree

Bachelor's degree

Master's degree

Certificate program for person with a degree (e.g., teacher's certificate)

Certificate program that does not require a degree (e.g., nurse practitioner)

Field of study/major _____

Starting date of classes _____ (must already be enrolled in program or start no later than January 2018)

Anticipated graduation or certification receipt date _____

What is the purpose of this education? (Check one only.)

- 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)

INSTITUTION

Type of institution (must be an accredited college or university in the US):

- Vocational/technical college Community/2-year college
- 4-year public college/university 4-year private college/university

Institution name (do not abbreviate) _____

Address _____

City _____ State _____ ZIP _____

Educational Record

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

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

Institution _____

Location (City & State) _____

Dates (mm/yy) From: _____ To: _____

Major Field of Study _____

Coursework status (Credit or Not for Credit) _____

Degree/Certification Earned & Yr Awarded _____

Career Objective Essay

Discuss your specific, short-term goals and how this proposed training and award will help you

[Type here]
CWN Form 3-2017 APP

accomplish these goals and make a difference in your professional career. Explain why there is a critical financial need. Include as a part of the essay a back-up plan in the event that the award is not granted. Confine your essay to the space allocated on this page of the application.

The CWN Scholarship Committee will consider your essay very carefully when your application is evaluated. It should be well thought out and relevant to your career goals.

Required Certification and Release of Information

This certification must be signed and dated by applicant to be considered for a scholarship.

I hereby certify that the information provided in this application packet is accurate and complete to the best of my knowledge.

I have read the *Required Application Components* for the CWN Scholarship and meet all stated conditions of eligibility.

I understand that this application will not be considered for review unless all requested materials are enclosed and the application is signed, dated, and received by the CWN Scholarship Chair not later than April 30, 2017.

I understand that applications are evaluated on the applicant's documented submissions, including reasons why applicant needs this award, description of career plans and goals, and letters of recommendation. I understand that the Foundation is not able to award scholarships to all eligible applicants. I understand that recipients are chosen by the CWN Scholarship Committee and that CWN does not comment on the review panel's deliberations or on any particular applicant's status.

I understand that all applications will be held confidential, and that no application material will be returned. I waive the right to access letters of recommendation written on my behalf.

I understand that scholarship funds cannot be used for expenses incurred before the period covered by the scholarship grant.

I understand that CWN will notify scholarship recipients by phone, followed by a written notification.

If selected to receive a CWN Scholarship, I give CWN permission to release my name, institution, essay, and photograph for promotional purposes. I understand that upon selection information will be released to the press and may be placed on the CWN website. [Please note: CWN does not require scholarship recipients to give permission to release information that could put themselves or their families at risk. If releasing your information will endanger you or your family, please attach an explanation to your application.]

Signature (required) _____

Date (required) _____

Application Checklist

The completed application and supporting papers must be received or postmarked at the address below no later than April 30, 2017. Please note that materials received after this date will be disqualified and will not be reviewed.	
Mailing Address	Email Address
CWN Scholarship Program P.O. Box 62 Easton, MD 21601	(for questions only, applications cannot be emailed or faxed) cwntalbot@gmail.com

The following items constitute a complete application package and must be submitted in a single packet. **If any item is missing, the application will be considered incomplete and will be disqualified.** See the *Required Application Components* for details.

Please organize packet materials in the following order. Do not include additional materials, e.g., photographs or resume.

1. Application Form - must be signed and dated.
2. Proof of successful graduation from High School or the equivalent GED certification.
3. Letter of Acceptance/Proof of Enrollment - if acceptance is pending, this item may be forwarded separately for receipt no later than May 15, 2017.
4. Proof of US Citizenship - include a copy of your birth certificate, US passport, voter registration card, or certificate of Citizenship or naturalization
5. Two Letters of Recommendation - each in a sealed envelope with recommender's signature written across the seal.

LETTER OF RECOMMENDATION

Applicant's full name (Type or print.) _____

Instructions to the Applicant

You must provide two current, confidential letters of recommendation from different sources (for instance, employer, professor, and clergy). Letters cannot be from relatives. Two letters are required; any additional letters will be discarded.

Provide a copy of this form to each evaluator. You should fully apprise your evaluators about the Chesapeake Women's Scholarship Program and your reasons for seeking a scholarship. Allow your evaluators at least two weeks to complete their letters. **Submit each sealed recommendation with your application for receipt by the April 30, 2017 deadline.**

Instructions to the Evaluator

The person named above is applying for a Chesapeake Women's (CWN) Network Scholarship. The CWN Scholarship Committee requests your candid, written evaluation of the applicant's qualifications. Since you know the candidate, the review committee is depending upon your thoughtful observations, especially relative to applicant's **academic, employment, and/or volunteer record; applicant's ability to undertake and complete her training;** and her **outstanding strengths or characteristics**. Please also include any other information that would assist the committee in the selection process.

The applicant will benefit most from a specific and illustrative evaluation rather than a general assessment. Your evaluation should discuss the applicant's strengths and, as appropriate, provide insight into any areas where growth is needed. Please define the criteria upon which you base your judgment and how the applicant meets your criteria.

The letters should be written on the letterhead of your professional affiliation. Recommendation letters must be current and dated no earlier than six months before date of submission of application; older letters and copies will not be considered valid.

Please complete the information below and return this form and your signed letter of recommendation to the applicant in a sealed envelope. Sign your name across the seal of the envelope. Your evaluation will be confidential, intended for use only by Chesapeake Women's Network Scholarship review committee. **Your evaluation will not be released to the applicant. All application materials must be submitted by the applicant for receipt on or before the April 30, 2017 deadline.**

The CWN Scholarship Committee thanks you for your assistance. For further information, visit www.cwntalbot.com

Evaluator's Name (Please type or print.) _____

Professional Title _____ Affiliation _____

Address _____ City _____

State _____ ZIP _____ Email _____

Phone _____ How long have you know the applicant? _____

In what capacity? _____