



GRWC JUPITER-TEQUESTA JUNIOR WOMAN'S CLUB
 P.O. Box 3811
 Tequesta, Florida 33469-0811



ADULT SCHOLARSHIP APPLICATION

QUALIFICATIONS FOR ADULT APPLICATION

- You must be a female resident of Jupiter or Tequesta.
- You must be an adult, returning to complete a higher education.

PERSONAL INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____ SOCIAL SECURITY #: _____

OCCUPATION: _____

• FULL TIME: _____ PART TIME: _____ HOW LONG: _____

AGE: _____ MARITAL STATUS: _____

NAME, ADDRESS & PHONE NUMBER OF EMPLOYER: _____

- Name _____
- Address _____
- Phone Number _____

HUSBAND'S NAME (if applicable): _____

HUSBAND'S OCCUPATION: _____

• FULL TIME: _____ PART TIME: _____ HOW LONG: _____

Name of children or dependants	Age	Living at home	In college

ARE THERE ANY SPECIAL CIRCUMSTANCES TO BE TAKEN INTO CONSIDERATION?
(I.E. - Medical, Financial, Family)

COMMUNITY SERVICE

PLEASE SUMMARIZE ANY COMMUNITY SERVICES: (I.E. – Clubs, Organizations, Volunteer Work). Please use extra sheet if necessary.

SCHOLASTIC INFORMATION

(If possible, include a current college/university transcript from your degree seeking institution.)

HIGHEST EDUCATION COMPLETED: _____

GRADE POINT AVERAGE: _____

COLLEGE CURRENTLY ATTENDING: _____

DEGREE BEING SOUGHT: _____

TOTAL HOURS COMPLETED TOWARD DEGREE: _____

TOTAL HOURS NEEDED TO COMPLETE DEGREE: _____

***PLEASE ATTACH ANY TRANSCRIPTS, IF YOU HAVE THEM.** (I.E. – a Xerox copy or an unofficial copy will do).

FINACIAL STATUS

HAVE YOU APPLIED FOR AND/OR RECEIVED ANY OTHER FINANCIAL AID OR SCHOLARSHIP MONIES? IF SO, HOW MUCH?

WHAT IS YOUR CURRENT FINANCIAL STATUS? HOW ARE YOU CURRENTLY PAYING FOR YOUR COLLEGE EDUCATION? HOW MUCH FINANCIAL ASSISTANCE DO YOU NEED ON A QUARTERLY BASIS? ARE YOU RECEIVING ANY OTHER FINANCIAL SUPPORT FROM ANOTHER SOURCE? PLEASE ANSWER EACH QUESTION IN DETAIL.

BRIEFLY DESCRIBE WHY YOU QUALIFY TO BE AWARDED THIS SCHOLARSHIP

PLEASE PROVIDE THREE REFERENCES AND PHONE NUMBERS

1.

2.

3.

PLEASE ATTACH ANY WRITTEN REFERENCES.

I certify that all the above statements are true and correct. If requested, I agree to be interviewed by the selection committee.

Signature of Applicant

Date

DEADLINE: MUST BE POSTMARKED BY MARCH 31, 2008

PLEASE SUBMIT APPLICATION, ALONG WITH ANY OTHER WRITTEN INFORMATION, REFERENCES AND/OR TRANSCRIPTS TO:

JEANNE TAKEDA
JTJWC EDUCATION CO-CHAIR
5353 PARKSIDE DRIVE – SR 118
JUPITER, FLORIDA 33458