

Re-Entry Scholarship Application

Name				
Mailing Address				
Email				
			Zip Code	
Daytime Phone:		Home Phone		GPA
Number in Family _		Number of Depender	nts	
List in chronologica ending with the coll		•	d, beginni	ng with high school and
Name of School	City/State	Dates Attended	Major	Date Graduated
Please list scholars	hip(s) or fellow	ship(s) you have recei	ved:	
Source	Amount	Where held		Dates

List educational achievements and other awards:

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List community interests/activities you have participated in, offices held, etc.:

List your field of study:						
List the specific skills you plan to acq	uire:					
HSU Enrollment: Jr	Sr_	Graduate				
Number of units in Fall semester:		Number of years out of school:				
Expected program completion date: _						
Financial Support: List financial sour	ces for e	ducation: HSU				
Other:						

Length of residency in Humboldt, Del Norte or Trinity County

Submit a statement describing your educational goals, circumstances that have created financial need, how you plan to give back to your community, and how AAUW Re-entry Scholarship will assist you in achieving your goals. Please keep your statement one-to-two pages.

Final selection of recipients for this scholarship will include an interview with the scholarship committee. For the interview, the applicant must bring a transcript showing current GPA and class standing. Finalists who are selected for an interview will be contacted by email.

Application Deadline: 31 October 2020

If questions, contact AAUW Chair of Reentry Scholarship Committee at marjean116@gmail.com or 415-342-4393

Email application and references to: <u>marjean116@gmail.com</u> or Mail to:

AAUW Humboldt Branch Re-entry Scholarship Committee 1875 Riberio Lane Arcata, CA 95521