

# **Re-Entry Scholarship Application**

Name

Email

Preferred Phone

Mailing Address

City State Zip Code

Number in Family Number of Dependents

Length of residency in Humboldt, Del Norte, or Trinity County

Number of years out of college-level studies

**CPH Enrollment:** Jr Sr Graduate GPA

Number units in Fall semester: Expected program completion date:

Field of study and department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Specific skills you plan to acquire: ­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Financial Support:** List current financial sources for education from CPH and others:

 Source Amount Where held Dates

List in chronological order the **schools you have attended**, beginning with high school and ending with your current CPH enrollment:

Name of School City/State Dates Attended Major Date Graduated

List educational achievements, awards, and scholarships/fellowships you have received:

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

Please also **submit a personal statement** describing your educational goals, circumstances that have created financial need, how you plan to give back to your community, and how the AAUW Re-entry Scholarship will assist you in achieving your goals. Please keep your statement to one-to-two pages. In addition, **two letters of recommendation** need to be submitted directly to us, prior to the deadline.

**Application Deadline: October 31, 2024**

**Submit to:** **gina.rogers72@gmail.com**

Final selection of recipients for this scholarship will include an interview with the scholarship committee. Finalists who are selected for an interview will be contacted by email.

If questions, contact AAUW Chair of Reentry Scholarship Committee Margaret Wallace at marjean116@gmail.com