

## **Re-Entry Scholarship Application 2025**

Name									
Email									
Preferred Phone									
Mailing Address									
City_	State	Zip Code							
Number in Family	Number of D	ependents							
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 co	mpletion date:						
Field of study and de	epartment:								
Specific skills you pla	an to acquire:								
Financial Support:	List <u>current</u> financial so	urces for education fror	n CPH and others:						
Source	Amount		Dates						

List in chronological order the <b>schools you have attended</b> , beginning with high school and ending with your current CPH enrollment:						
Name of School	City/State	Dates Attended	Major	Date Graduated		
List educational ach	ievements, awaı	rds, and scholarships/	fellowships y	ou have received:		
List community inter	rests/activities yo	ou have participated i	n, offices held	d, etc.:		
ave created financial ntry Scholarship will a	need, how you ր assist you in ach	olan to give back to yo ieving your goals. Ple	our communit ase keep you	oals, circumstances that y, and how the AAUW Re- ur statement to one-to-two d directly to us, prior to the		
	Applicati	on Deadline: Octo	ber 31, 202	25		
	Submit t	to: Autumn Chapm	nan co-chai	r		

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.

autleaf46@gmail.com

If questions, contact AAUW co-Chair of Reentry Scholarship Committee Rosemarie Weaver at <a href="mailto:roseweave52@gmail.com">roseweave52@gmail.com</a>