



## Professional Women of Sullivan County, Inc.

### High School Scholarship Award Application

#### Requirements for Awards:

- Applicant must have met the entrance requirements of intended accredited school
- Applicant must be a Sullivan County Resident for a minimum of two years
- Two letters of reference are required
- IMPORTANT- All necessary information MUST BE submitted with this application (including transcripts and references)
- Application MUST be received by **April 24, 2015**
- Scholarship checks will be given out at our annual Scholarship dinner, which will be held on **May 20, 2015** at Bernie's Holiday Restaurant at 6:00 pm. Award recipients are expected to attend as the guests of Professional Women of Sullivan County.

#### PLEASE PRINT YOUR ANSWERS TO THE FOLLOWING QUESTIONS:

1. Name: (print) \_\_\_\_\_

2. Address: \_\_\_\_\_

\_\_\_\_\_

3. Telephone: \_\_\_\_\_

4. Email: \_\_\_\_\_

5. High School are you attending: \_\_\_\_\_

6. Interests and hobbies: \_\_\_\_\_

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7. Extracurricular/Community Activities:

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8. Employment History:

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9. Schools from which you have received acceptances:

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10. School you plan on attending **and** your major:

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11. Other Scholarships awards you have applied for/received:

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12. Attach a typed essay no longer than **one double spaced page** answering the following question.

**Graduating from high school is an amazing feat. Now, you will make decisions that will profoundly impact your future. What do you hope your future holds in store for you? How does furthering your education figure in to this?**

Please sign and date this application.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**ALL APPLICATIONS BECOME THE PROPERTY OF THE PROFESSIONAL WOMEN OF SULLIVAN COUNTY**

Send all information by April 24, 2015 to:  
Professional Women of Sullivan County  
P.O. Box 1043  
Monticello, NY 12701