

**APPLICATION**

**THE WOMEN'S CLUB OF ACCOMACK COUNTY  
EDUCATION AND HEALTH PROFESSIONAL  
\$700 SCHOLARSHIP**

All information provided will be regarded as confidential

All information is to be completed by the applicant. This application form along with a recent transcript, two letters of recommendation and a brief statement outlining your career goals and some information about yourself should be submitted to:

**Christine Petersen  
PO Box 14  
Harborton, VA 23389**

The deadline for applications is **April 15<sup>th</sup> 2014**

The scholarship will be awarded at the Club's annual luncheon in June at a place to be determined. Winners must attend.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_

Name and address of school currently attending: \_\_\_\_\_

\_\_\_\_\_

Name and address of college: \_\_\_\_\_

\_\_\_\_\_

Degree Program/ Major: \_\_\_\_\_

Total college expenses per year\$ \_\_\_\_\_

Amount you and/or your family can provide\$ \_\_\_\_\_

Amount received from other sources-scholarships, loans etc\$ \_\_\_\_\_

School and community extra-curricular activities \_\_\_\_\_

## **RULES GOVERNING THE FANNIE STEARNES SCHOLARSHIP**

### **TIDEWATER DISTRICT GFWC VIRGINIA**

1. The Fannie Stearnes Scholarship is available to any high school graduate residing in the Tidewater District. The scholarship shall be for further educational training.
2. The application must be made in the student's own handwriting and must be accompanied by:
  - a) A transcript of applicant's school record
  - b) A letter from a Federated Woman's Club acting as sponsor
3. The recipient must attend a Virginia School.
4. The student shall write a letter at the end of each semester or quarter to the Chairman of the Fannie Stearnes Scholarship Committee enclosing his or her grades for that semester or quarter.
5. Fannie Stearnes Scholarship Committee may grant one scholarship in the amount of five hundred dollars (\$500.00) per year not to exceed a total of two thousand dollars (\$2000.00) to any one applicant.
6. The Fannie Stearnes Scholarship Committee shall consist of the District Chairman, Chairman of the Education Department, and a Junior Representative, and shall serve until May 31<sup>st</sup> of the second year of an administration. The District President and the District Treasurer shall be ex-officio members of the committee.
7. Applications must be mailed by April 15<sup>th</sup> to the Chairman of the Committee. Scholarship recipients must submit an application each year by the above date for additional consideration.
8. Changes in these rules made by this committee must be approved by the Executive Committee of the Tidewater District.
9. The Fannie Stearnes Scholarship Chairman shall notify the recipient by May 15<sup>th</sup>.
10. The District Treasurer shall mail the scholarship check directly to the named school by July 1<sup>st</sup>.

# THE FANNIE STEARNS SCHOLARSHIP STUDENT APPLICATION

Tidewater District – GFWC Virginia

Sponsoring Club Name and Address WOMENS CLUB OF ACCOMACK COUNTY  
PO Box 754 ONLEY VA 23418

The Fannie Stearnes Scholarship is available to any high school graduate residing in the Tidewater District. The Scholarship shall be for further educational training. Application must be completed and returned by the Chairman of the sponsoring club by April 15<sup>th</sup>. 12<sup>th</sup>.

The Club Chairman's name and address CHRISTINE PETERSEN  
PO Box 14 HARBORTON VA 23389

1. Student Applicant's Name \_\_\_\_\_ Sex M/F \_\_\_\_\_
2. Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Marital Status \_\_\_\_\_
3. Permanent Address (where mail will always reach you) \_\_\_\_\_  
\_\_\_\_\_  
Present address \_\_\_\_\_  
\_\_\_\_\_  
Phone (     ) \_\_\_\_\_
4. School of Applicant's choice for which scholarship is requested \_\_\_\_\_  
Address of school \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Date of application to this school \_\_\_\_\_ Status of application \_\_\_\_\_  
Type of school \_\_\_\_\_ Course of study you will pursue \_\_\_\_\_  
What degree or certificate will you seek? \_\_\_\_\_  
What aid has this school offered you? (loans, scholarships, employment) \_\_\_\_\_  
If you have applied to other schools, please give details  
\_\_\_\_\_  
\_\_\_\_\_
6. Employment in school year and summers (last three years)  

Employer and address	Dates	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____
7. If the applicant is already a college student applying for assistance on an advanced degree, please submit college transcript.
8. Please use a separate sheet of paper to make a statement of your aspirations and to give brief and pertinent information regarding your NEED for a scholarship. Include any information that you believe will help the committee evaluate your application.

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

THE FANNIE STEARNES SCHOLARSHIP APPLICATION

Tidewater District  
GFWC – Virginia

(THIS PAGE TO BE COMPLETED BY OFFICIALS OF APPLICANT'S SCHOOL)

**Instructions:** Please complete this form; attach transcript of applicant's grades; mail to sponsoring club's chairman.

Name of applicant \_\_\_\_\_ School \_\_\_\_\_

1. Candidate entered date \_\_\_\_\_ Date graduated / will graduate \_\_\_\_\_
2. Candidate's test scores  
College Board SAT – Date taken \_\_\_\_\_ Verbal \_\_\_\_\_ Mathematical \_\_\_\_\_  
Other Tests: (Please give test name, date taken, percentile score, norm, I.Q., etc)
3. Describe course pursued by applicant at your school.
4. This applicant most recently ranks \_\_\_\_\_ from the top of his/her class of \_\_\_\_\_ students.  
Also, most recently ranked \_\_\_\_\_ from the top of his/her group in a college preparatory test of \_\_\_\_\_ students.
5. Have there been unusual factors, in or out of school, which have affected the candidate's classroom record?
6. On the basis of his/her capacity, motivation and scholastic achievement, please indicate by circling on the scale below your expectation of the candidate's performance at the school of his/her choice.  
9      8      7      6      5      4      3      2      1      0  
Excellent      Good      Average      Fair      Poor
7. Has the candidate contributed significantly to the life of the school? \_\_\_\_\_ In what way?
8. SUMMARY. Your judgment of this candidate is of great importance to us. Please write your summary appraisal and recommendation. The fullest possible statement is invited. Additional sheets may be used.

Signature \_\_\_\_\_ Title \_\_\_\_\_

Please print or type the signature

Name of School Official \_\_\_\_\_ Date \_\_\_\_\_