

# ***The Women of Quail Creek Scholarships for Women in Transition 2023***

## **Purpose**

The Women of Quail Creek (TWOQC) Scholarship Committee is offering scholarships of up to \$3,500 to assist women in transition who are returning to school. The award is given toward obtaining a certificate or degree, to increase job skills or to acquire a new job skill.

## **Eligibility**

- Resident of Pima or Santa Cruz County
- Women who will be twenty-one years of age or older by the end of the calendar year, 2023.
- Documented need for educational expenses
- Enrolled or has a letter of acceptance from an accredited vocational/technical program, a 2- year or 4-year college program. Include a copy of the letter of acceptance and most recent transcript, if applicable, with your application.

**Previous Scholarship winners may be awarded one additional time.**

## **Selection Criteria**

The following factors, among others, are considered for each applicant:

- Completed Application with all forms submitted
- Goals and your plan for reaching your goals
- Need for educational expenses

## **How Award Money Can Be Used**

Scholarship funds **may only be** used to pay for tuition and education fees. The money will be issued directly to the educational institution. Unused funds will be returned to TWOQC Scholarship Committee.

## **Personal Essay**

When you write about your personal goals and ambitions, be sure to provide enough information for the Scholarship Committee to clearly understand your plans and recognize your potential. Include work and/or volunteer experience, if applicable. **See Personal Essay IV for further information.**

### **Two letters of Recommendation**

The **two** letters of recommendation **cannot** be from family members. Some suggestions for letters of recommendation include: clergy, employers, social workers, counselors, and teachers, co-workers, supervisors, and academic advisors.

#### **When you ask a person for a recommendation you need to:**

1. Explain the Scholarship to your references and tell them why you are applying.
2. Give them the Confidential Recommendation Form (see p. 5) to be completed and submitted along with their letter of recommendation.
3. Provide each person writing your recommendation an envelope addressed to you in which they will place the Confidential Recommendation Form and their letter of recommendation, and then seal it, and return it to you. **Only applications with recommendations in a sealed envelope will be considered.**
4. Allow them at least two full weeks to complete their letter and Recommendation Form. Ask them to return both documents in the sealed envelope to you at least 5 business days before the scholarship submission deadline date so that you will have time to get the entire package to the committee by the deadline, **March 13, 2023.**

**WOMEN IN TRANSITION SCHOLARSHIP APPLICATION**

**PART I - PERSONAL DATA**

Name (last, first, middle initial) \_\_\_\_\_

Date of Birth (month | day | year) \_\_\_\_\_

Address

Street: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (area code first): ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_

Marital Status (circle one) Single Married/Partner

**Work History**

List most recent employment first.

Employer: \_\_\_\_\_

Your Position: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Supervisor's name/phone number: \_\_\_\_\_

Employer: \_\_\_\_\_

Your Position: \_\_\_\_\_

Dates Employed: \_\_\_\_\_

Supervisor's name/phone number: \_\_\_\_\_

**PART II – EDUCATION**

Name of High School: \_\_\_\_\_ Location \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ or Date of GED: \_\_\_\_\_

Are you currently enrolled in school?  YES  NO

If yes,  Full time or  Part time

Name of School: \_\_\_\_\_

Course of Study: \_\_\_\_\_

List any educational institutions attended and/or pertinent training you received after high school.

Name of Institution: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Certification Earned: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Certification Earned: \_\_\_\_\_

**PART III – FINANCIAL NEED**

List your **monthly income** from all sources

Your work: \$ _____	Spouse/partner's work: \$ _____	Child Support: \$ _____
Alimony: \$ _____	Government benefits: \$ _____	Social Security benefits: \$ _____
Grants: \$ _____	Other sources: \$ _____	
<b>Total Income: \$ _____</b>		

Other assets such as savings: \$ \_\_\_\_\_

List your total **monthly expenses**:

Housing (Rent or Mortgage): \$ _____	Utilities(Water/sewer, Electric, Gas, Trash): \$ _____
Groceries: \$ _____	Childcare: \$ _____
Medical: \$ _____	Transportation( Car payments, gas, maintenance, public transportation): \$ _____
Insurance (Medical, Car, Home): \$ _____	Communication (Cellphone, phone, Internet): \$ _____
Other Expenses: \$ _____	
<b>Total Monthly Household Expenses: \$ _____</b>	

Do you currently owe any tuition? Yes No      If yes, how much? \_\_\_\_\_

Have you taken out any student loans? Yes No  
If yes, how much do you currently owe? \_\_\_\_\_

How many people in your household do you financially support \_\_\_\_\_

**Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Relationship** \_\_\_\_\_

List below any anticipated educational expenses beyond tuition such as lab costs, special course related fees, unique equipment required, etc.

Expense Cost: \_\_\_\_\_ \$ \_\_\_\_\_

Expense Cost: \_\_\_\_\_ \$ \_\_\_\_\_

Expense Cost: \_\_\_\_\_ \$ \_\_\_\_\_

In addition to any possible scholarship, please explain how you intend to pay for your education in order to complete your degree.

(use separate pages if needed.)

**PART IV - PERSONAL ESSAY**

**If you are a previous Scholarship applicant, applying again, please include an update of the past school year: credits earned, projected graduation date, etc.**

Your essay (not to exceed 1500 words) **must** include:

1. Why you made the decision to pursue this course of educational study.
2. The steps you have already taken, or accomplished, toward achieving your goals.
3. Share any additional information about yourself which may be pertinent to the application including special circumstances (for example, illness in the family, loss of employment, change in family structure, etc.)

(use separate pages if needed.)

**Where did you learn about the scholarship opportunity?**

I hereby affirm that the information provided on this form and in the accompanying material is accurate and complete to the best of my knowledge. In addition, I understand that all information contained in my application may be shared with the Scholarship Committee and that efforts will be made to protect the privacy of the information

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Mail completed application form to**

Suzan Bryceland, 618 N Yucca Butte Ln, Green Valley, AZ 85614

**MUST BE POSTMARKED BY March 13<sup>th</sup>, 2023**

**Incomplete applications will not be considered.**

**Important:**

**Scholarship Application CHECKLIST**

**Include in your envelope**

\_\_\_\_\_ **Completed Application**

- **Fill out all pages of the application completely. If a question does not apply, write NA rather than leave it blank.**
- **Be sure your handwriting is legible if you do not type your responses.**
- **Double check your spelling**
- **Ask someone to proofread the application.**

\_\_\_\_\_ **Two letters of recommendation in individually sealed envelopes.**

\_\_\_\_\_ **Copy letter of acceptance and/or transcript.**

**Notification:**

**The applicants selected for an interview will be notified by telephone. All other applicants will be notified by email.**

**CONFIDENTIAL RECOMMENDATION FORM**

**THE WOMEN OF QUAIL CREEK (TWOQC) WOMEN IN TRANSITION SCHOLARSHIP**

Name of Applicant: \_\_\_\_\_

The above named person has applied for The Women of Quail Creek Educational Scholarship for Women in Transition. **Please return your recommendation to the applicant in a sealed envelope.** Thank you for taking the time to provide this recommendation.

How long have you known this applicant? \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Rate the following characteristics with a number: (Please provide an explanation for 3 or 4. Use the reverse side for additional comments).

1. Superior   2. Good   3. Average   4. Below Average

_____ Achievement	_____ Industry
_____ Seriousness of purpose	_____ Emotional Stability
_____ Motivation	_____ Inspiration to others
_____ Initiative	_____ Sense of Responsibility

In your opinion, how great is the applicant's need for financial assistance? Check one

\_\_\_\_\_ Average    \_\_\_\_\_ Great    \_\_\_\_\_ Unknown \_\_\_\_\_

**Comment:** \_\_\_\_\_

Why do you feel this woman is deserving of this Scholarship? *(please use separate page)*

Signature/Title \_\_\_\_\_ Date \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (     ) \_\_\_\_\_

Email address \_\_\_\_\_