



Scholarship Application <http://mountainlakes-nj.aauw.net>

Applicant Requirements

- 1. Female resident of Morris County or enrolled at a college in Morris County.**
- 2. Completion of sophomore year at an accredited college or university, or matriculation in a Master's program by June 2024.**
- 3. A Signed Cover Letter including Personal and Career Goals.**
- 4. Applications must be mailed and postmarked no later than April 1, 2024.**

Personal Information

Name _____

First	Middle	Last
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Birth Date ____/____/____

Home Address _____ Preferred Phone _____

City _____ Zip _____

Email Address _____

Occupation _____ Employer _____

Student Contact Information

College, University, or Technical School Attended _____

Years Completed _____ Credits to Date _____ Part Time Student _____

Full Time Student _____

Major _____ Degree (if granted) _____ Cumulative GPA _____

College Address _____ Preferred Phone _____

City _____ State _____ Zip _____

**Mountain Lakes Area Branch of AAUW Scholarship Application
Financial Statement**

Income

Applicant's Gross Income \$ _____

Attach a copy of the first page of last year's IRS return indicating your gross income.

Anticipated expenses for next year:

- tuition \$ _____
- room and board \$ _____
- transportation \$ _____

To Finance Your College Course Load

How are you personally contributing to the cost of your education?

Have you received other scholarship aid? Yes ___ No ___ If so, how much? _____

What is your educational indebtedness? _____

What are your plans for financing the remainder of your education?

References

Please attached three (3) signed letters of recommendation from diverse sources (not a relation). For example, volunteer organizations, clergy, employer, college professors .

Please include addresses and phone numbers.

Certification

I certify that the above statements are true:

Signature _____ Date _____

Required Documentation

- Three signed letters of reference
- A recent official transcript from your college
- An income tax return (first page only)
- A completed Scholarship Application

Return mail this application with all documentation to:

Mountain Lakes Area AAUW Scholarship Committee
C/O Sandy Sepcie
60 Monroe Avenue
Roseland, New Jersey 07068

How did you hear about this scholarship application? _____

Would you like to learn more about AAUW? _____

If you have any questions, please contact Sandy Sepcie (ssepcie@gmail.com).