



## Scholarship Application

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

Occupation / Industry: \_\_\_\_\_

Company: \_\_\_\_\_

Position / Title: \_\_\_\_\_

Are you also a student? If so, at what school? \_\_\_\_\_

What degree or certification are you seeking? \_\_\_\_\_

Are you a member of BPW? \_\_\_\_\_ Date Joined: \_\_\_\_\_

Have you ever been a member of BPW? \_\_\_\_\_ If so, when did you join? \_\_\_\_\_ Date ended: \_\_\_\_\_

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

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

Prefer Correspondence by:  E-mail  Phone

E-mail Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

- Which Scholarship Are You Seeking?
- Individual Development – Stepping Stones To Personal & Professional Success
  - Leadership St. Pete
  - Membership Dues Renewal Date: \_\_\_\_\_
  - Other Brief Description: \_\_\_\_\_

Please describe below anything you would like BPW St. Petersburg – Pinellas to consider regarding your application for Scholarship. Feel free to attach additional items or use the back of this form.


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

*Please e-mail, fax or mail this application using the information below.*