



S O R O P T I M I S T
Best for Women

Soroptimist International
of Vallejo

P.O. Box 4262
Vallejo, Ca 94590

www.sivallejo.org
siovojo@hotmail.com

Scholarship Application Form
for women and girls

Applicants should be:

- Graduating high school seniors who are residents of Vallejo

Applicants are evaluated on financial need, academic achievement, community involvement, and personal goals.. A personal interview is included in the selection process.

Soroptimists, immediate family of Soroptimists and employees of Soroptimist are not eligible for the award.

Application deadline is April 15 for the following academic year.

Date _____

Name _____

School _____ GPA _____

Address _____

Home Telephone _____ Cell Telephone _____

Email Address _____

Date of Birth ____/____/____ SSN _____

Father's Name _____

Father's Occupation _____

Mother's Name _____

Mother's Occupation _____

Combined annual gross income of both parents _____

Do you live with both parents? Yes No If not, with whom do you live? _____

If parents are separated or divorced what is the financial contribution of each parent? _____

If you are self-supporting, what is your income and what is the source of your income? _____

List other members of your family who are dependent on the family income. Include names, ages, and relationships. Indicate any financial assistance which they are able to provide.

What is the total amount of funds available for your education, including contributions from family members, savings, and wages, but not including other scholarships or loans? \$ _____

Do you have any dependents who rely on you for their financial support? Yes Number ____ No

*Improving the lives
of women and girls,
in local communities
and throughout
the world.*

For which school do you plan to use these scholarship funds? _____

Have you been accepted to this school? Yes No What is your anticipated major? _____

What are your career goals? _____

How many units of college level work have you completed? _____ What is your anticipated graduation year? _____

List honors and awards you have received:

| List other scholarships for which you have applied: | Amount Awarded | Not Yet Heard |
|---|----------------|---------------|
|---|----------------|---------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Have you applied for any other financial aid (loans, grants, fellowships, etc.) Yes No

| If so, what is the source of this aid? | Amount Awarded | Not Yet Heard |
|--|----------------|---------------|
|--|----------------|---------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Extracurricular activities and community service projects (in and out of school), offices held, and work experience:

List any extenuating circumstances you would like us to consider in evaluating your application.

I certify that the information contained in this application is true and complete. I understand that any misrepresentation of facts may result in my forfeiting and/or having to reimburse any scholarship money awarded.

Signed _____

Attach an **official** copy of your transcript, SAT or ACT scores (high school students only), and at least two (2) letters of recommendation. You should also attach a personal statement of no more than 750 words.

Return completed application *by mail* by April 15 to Soroptimist International of Vallejo, PO Box 4262, Vallejo, Ca 94591.

SOROPTIMIST INTERNATIONAL OF VALLEJO SCHOLARSHIP APPLICATION

Income and Expense Budget

Estimate average ANNUAL expenses for the year. If a category does not apply to you, enter a zero (0).

Attach to Application for Scholarship and mail to Scholarships, Soroptimist International of Vallejo, 145 Plaza Drive, Ste 207-PMB 225, Vallejo, Ca 94591

EXPENSES

Educational Expenses

Include tuition, mandatory fees, books, supplies, online services, health insurance if required, etc.

\$ _____

Room and Board

Include room, board, utilities, phone, water, sewage, groceries, dining out, campus meal plan, beverages, etc.

Personal Expenses

Laundry, clothes, personal care, entertainment, recreation, insurance, memberships, etc.

Transportation

Car payments, gas/oil, public transportation, normal car maintenance, car insurance, etc.

Other

List what other types of expenses you will have:

TOTAL EXPENSES

\$ _____

INCOME

Wages and tips, less taxes and deductions

\$ _____

Other scholarships

Financial Aid from college

Federal Student Loan

Other loan

Support from parents

Support from other than parents

Other income

List what other sources of income you will have:

TOTAL INCOME

\$ _____

Savings you will have access to

TOAL INCOME AND SAVINGS

\$ _____

I CERTIFY THAT THIS IS MY BEST ESTIMATE OF MY EXPENSES AND INCOME FOR THE COMING ACADEMIC YEAR.

Signed _____ Date _____

attach to application

Scholarship Application Check List

This check list is included for your convenience and does not need to be included in your application package.

Your application for scholarship package should include the following:

- Completed Application Form
- Application Form signed
- Completed Income and Expense Budget
- Income and Expense Budget signed.
- Official copy of your transcript
- SAT or ACT scores
- Two (2) letters of recommendation
- Personal statement of no more than 750 words

The deadline for submitting your application is April 15. Please take mailing transit time into consideration.

The mailing address to use is:

Soroptimist International of Vallejo
P.O. Box 4262
Vallejo, Ca 94590

If you need guidance on completing the forms or have any questions, please email us at siovjo@hotmail.com.