



SOROPTIMIST

Best for Women

Soroptimist International
of Vallejo

145 Plaza Dr., Ste 207—PMB 225
Vallejo, Ca 94591

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

Scholarship Application Form for women and girls

Applicants should be:

- High school seniors who are residents of Vallejo, or
- Recent graduates of Vallejo high schools who have not yet matriculated into college.

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 March 31, 2011 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

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
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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
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_____	_____	_____
_____	_____	_____
_____	_____	_____

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 March 31, 2011 to Soroptimist International of Vallejo, 145 Plaza Dr., Ste 207-PMB 225, Vallejo, Ca 94591. **Note: hand delivered copies cannot be accepted.** If you have questions, please email us at scholarships@sivallejo.org or call (707) 552-1105