



# Soroptimist International of Truckee Meadows 2024 Educational Assistance Application

Soroptimist International of Truckee Meadows ("SITM") believes that every woman should have an opportunity to develop her capabilities to the fullest. The Women's Scholarship and Awards Committee of SITM is responsible for awarding scholarships to qualified applicants who demonstrate financial need. Monetary values of scholarships range from \$500 to \$8,000 and are initially awarded in the fall:

- □ UDERGRADUATE: SITM *Dreams Moving Forward* Undergraduate Scholarships Undergraduate scholarships are awarded annually to re-entry women (women whose lives and academic studies have been interrupted because of family or other considerations and now have returned or wish to return to college). To be eligible for this scholarship, an applicant must be enrolled in one of the following:
  - A four-year Bachelor Degree program at the University of Nevada, Reno, or other Northern Nevada four-year institution
  - An Associates Degree Health Science or Vocational Program of a Northern Nevada Community College; or
  - A Northern Nevada Community College with the intention to transfer to a Bachelor Degree program at the University of Nevada, Reno.

#### Scholarship recipients must

- Register for and complete a **minimum of 9 credits per semester** (online courses are acceptable)
- Maintain a minimum 2.5 GPA.
- Submit proof of college registration and Spring 2024 grades to the Women's Scholarship & Awards Committee coordinator before the start of the Fall 2024 semester (and before the start of each subsequent semester until the total award has been paid).

#### ☐ GRADUATE: SITM *Dreams Moving Forward* Graduate Scholarships

To be eligible for the scholarship, an applicant must:

- Be accepted and enrolled for a **minimum of nine (9) graduate level credits** in a graduate program at the University of Nevada, Reno.
- Provide proof of registration

This scholarship may be paid in one lump sum or may be disbursed to your school each semester upon receipt of previous semester's grades and upcoming semester's registration.

#### □ SITM \*NEW\* *Dreams Moving Forward* DeeAnn Roberts EDUCATION Scholarship

To be eligible for the scholarship, an applicant must:

- Be accepted and enrolled as an **Education Major** for a **minimum of nine (9) credits** per semester at the University of Nevada, Reno applicant is not required to be a re-entry student
- Refer to Undergraduate scholarship requirements above. Applications from Graduate students also accepted.

#### Mailing Instructions - Application Deadline: Postmarked or EMAILED by March 15, 2024.

- EMAIL completed application and all materials to womenscholarships@sitmnv.org or MAIL to SITM Women's Scholarship & Awards Committee, P. O. Box 20125, Reno, NV 89515.
- If you have any questions, please contact the Women's Scholarship & Awards Co-Coordinator, Pam Robinson, womenscholarships@sitmnv.org, or 775-742-0627.

# **Soroptimist International of Truckee Meadows** Applying for: Graduate 2024 Educational Scholarship \_\_\_\_ Undergraduate **Application Form Education Major** Part I. Basic Information Name (last, first, middle initial): Address (number and street address): City/Province: State: Zip Code: \_\_\_\_\_\_ Country: Email: Phone: Marital Status: Date of Birth: Highest level of education achieved: Currently enrolled? yes no Number of dependents you support (NOT including yourself): How are they related to you (children, spouse, parents, etc.)? Ages (if they are children): How did you hear of our scholarship opportunity? Part II. What are vour education and career goals? A. What is the name of the school or training program you are attending or have been accepted to? B. What are you studying? (Example: Bachelor of Science nursing degree or computer science certificate) C. When will you complete your studies (month and year)? Total credits REMAINING to complete program. D. Are you working while you are getting your education? (check one) yes no If yes, what is your occupation and how many hours do you work per week?

E. History, Hopes & Dreams. In a 1-2 page double-spaced essay on separate pieces of paper, please tell us a little about yourself, your academic goals, challenges you have faced and overcome, and your plans for

the future!

## **Part III. Financial Information**

Scholarship recipients are chosen in part based on financial need. Please share information about your annual income and expenses. Be as exact as you can. Scholarships are awarded based on financial need.

Savings: \$ per year	year Social Security (U.S. only): \$ per year  year Scholarships: \$ per year  cluding income other household members receive.  \$ per year  TOTAL ANNUAL INCOME: \$ per year  ar year Utilities: \$ per year  ar year Medical: \$ per year  ar year Transportation: \$ per year  ar year per year
Child Support: \$ per year	year Social Security (U.S. only): \$ per year  year Scholarships: \$ per year  cluding income other household members receive.  \$ per year  \$ per year  \$ per year  \$ per year  TOTAL ANNUAL INCOME: \$  hold expenses in the chart below.  er year Utilities: \$ per year  er year Medical: \$ per year  er year Transportation: \$ per year
Loans: \$ per year Scholarships: \$ per year  Please list any additional income, including income other household members receive.  Source: \$ per year  Source: \$ per year  Anticipated changes for next year :  TOTAL ANNUAL INCOME: \$  B. EXPENSES: Please list your ANNUAL household expenses in the chart below.  Housing: \$ per year Utilities: \$ per year  Food: \$ per year Medical: \$ per year Medical: \$ per year Medical: \$ per year Medical: \$	year Scholarships: \$
Please list any additional income, including income other household members receive.  Source:	cluding income other household members receive.  \$
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Anticipated changes for next year :	TOTAL ANNUAL INCOME: \$  hold expenses in the chart below.  er year Utilities: \$ per year  er year Medical: \$ per year  er year Transportation: \$ per year
B. EXPENSES: Please list your ANNUAL household expenses in the chart below.  Housing: \$ per year Utilities: \$ per year Medical: \$	TOTAL ANNUAL INCOME: \$  hold expenses in the chart below.  er year Utilities: \$ per year  er year Medical: \$ per year  er year Transportation: \$ per year
B. EXPENSES: Please list your ANNUAL household expenses in the chart below.  Housing: \$ per year Utilities: \$ per year Medical: \$	TOTAL ANNUAL INCOME: \$  hold expenses in the chart below.  er year Utilities: \$ per year  er year Medical: \$ per year  er year Transportation: \$ per year
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Childcare: \$ per year Transportation: \$ p	
Please list any additional expenses.	
Expense:\$	
Expense:\$	
	©
Expense:\$	\$per year

### Part IV. Agreement

Please read the following information carefully. When you sign your name below, you agree to what you have read.

- I certify that all the information provided in this application is complete and accurate to the best of my knowledge. I will notify Soroptimist International of Truckee Meadows if there are any changes.
- I understand that my application becomes the property of Soroptimist International of Truckee Meadows. The application will be considered confidential unless the applicant grants Soroptimist written permission to release personal information for the purpose of publicizing the award. By signing your name below, you adhere to the above requirements.
- I hereby grant permission to Soroptimist International of Truckee Meadows (SITM) to use my name, likeness and/or voice for all publicity purposes and in any media format, relating to promoting and building awareness of the Soroptimist organization and its projects. Media formats include, but are not limited to: newspapers, magazines, television, radio, film, or on the Internet. This agreement is not saleable or transferable. SITM shall retain all rights to said materials. I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising form or related to the use of the image.

• Signature of applicant Date
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# Part V. Applicant Submission Checklist

All application information **MUST** be **emailed** or postmarked by March 15, 2024. Any application received incomplete or late may be rejected. Your package must include:

- Completed application
- College transcripts for the most recent 2 years. If none, submit transcripts from all high schools attended. Note: Copies of transcripts without certification will be accepted.
- Financial Data: The Income/Expense portion of this application must be completed and copies of your last two paycheck stubs (if applicable) **must** accompany this application.
- History, Hopes and Dreams Essay